

Brackett Independent School District

PO Box 586

Brackettville, Texas 78832

NON-RESIDENT STUDENT REQUEST TO TRANSFER INTO THE DISTRICT

Your child's application should include:

School Records

Attendance Records

Discipline Records

Most Recent Report Card

Most Recent STAAR/EOC Exams (4th-12th)

Or

Most Recent Stanford/ITBS Exams (K-3rd)

Please include the documents listed above when submitting this application. Until this application is complete, including all applicable documentation listed above, your child's transfer request will not be considered. Please complete the following fields in the application prior to submitting this transfer request to the Brackett Independent School District. It is important to note, if you have multiple children for whom you wish to request transfer, a separate application must be completed for each of those children.

NON-RESIDENT STUDENT APPLICATION FOR TRANSFER

1. Student's name: _____

2. Current address: _____

3. School district in which student resides: _____

4. Parent's name: _____

5. Parent's address: _____

e-mail address: _____

Home phone: _____ Cell phone: _____

6. Reason for transfer request: _____

7. Is either parent employed by the Brackett ISD? Yes No

8. Has the student ever been enrolled in the Brackett ISD? Yes No

9. What is your child's current grade level? _____

10. What is your child's requested transfer year? _____

11. Student's attendance record:

- a. How many days was the student absent in the school year prior to the year for which a transfer is requested? _____
- b. If this request is for a transfer during a school year, how many days has the student missed in the current school year? _____
- c. If the student missed more than ten percent of the days in the school year, please provide an explanation: _____

12. Has the student been assigned ISS, removed to DAEP, or expelled for one or more days in the most recent school year? Yes No During the preceding year? Yes No

If yes to either question, for what offense(s)? _____

As a parent or person standing in the position of legal responsibility for the child named in the request, I acknowledged that I have accessed and read Brackett ISD Board Policy FDA (LEGAL) and FDA (LOCAL) and the Transfer Agreement that must be executed before the child is enrolled in the District. The information provided in this form is true and factual to the best of my knowledge, and I understand that if any of this information is ever found to be incorrect, this application may be denied and/or my child's transfer approval revoked.

Parent Signature: _____ Date: _____

*****DO NOT WRITE BELOW THIS POINT*****

Enrollment Recommended ___ Yes ___ NO	Comments:
Principal Signature:	Date:
_____ Enrollment Approved _____ Enrollment Denied	
Superintendent Signature: _____	Date:

Date Parent was notified by Adm./Campus: _____