Canutillo Independent School District

(GOLDENROD)

7965 Artcraft Rd.
El Paso, TX 79932

Mailing Address: P.O. Box 100
Canutillo, TX 79835

INTRA-DISTRICT STUDENT TRANSFER REQUEST

School Year:

1.	Parent/Guardian Name:		Work Assignment (if CISD Employee):	
2.	Student's Name:			
3.	Student's Date of Birth:		Current Grade Level:	
4.	Current Home Address:			
5.	Home/Cell Phone Number:		Alternate phone or email:	
6.	Home Campus Student is currently assigned to attend based on home address:			
7.	Campus request transfer to:			

8. Reason for transfer request for extenuating circumstance s . (Please be specific as transfers will be granted only as they are mandated by The Texas Education Agency or extenuating circumstances and with the approval of the Superintendent).

9. **TERMS:**

- Transfers are approved to a school where space is available based on campus and program capacity, and that, according to District's FDA (Regulation) my child may be reassigned to a different campus in order to reestablish enrollment balance if an unexpected increase in enrollment on the campus occurs.
- All UIL rules shall apply.
- Parents/Guardians assume responsibility for transportation. Bus service is not provided.
- Transfers may be revoked due to excessive absences, tardies and/or repeated failure to pick up the student from school on time, violations of the Student Code of Conduct, lack of support for academic success, or if the student is no longer receiving childcare from the listed provider.
- Transfers may be revoked at any time during the year with approval from the Associate Superintendent or designee.
- I hereby declare that my child ____is ___ is not under an order for placement in an alternative education program or under an expulsion order. If my child is under any such order, I will provide an explanation or a copy of the order to CISD.

Parent's/ Legal Guardian's Signature:	Date:

CISD COMMENTS AND APPROVAL:

☐ Approved ☐ Denied _____ _____

Principal Signature Date

Denied for: ☐ Excessive Absences/Tardies ☐ Student Code of Conduct Violations ☐ Lack of Academic Support

Comments: _____

_____

_____

☐ Approved ☐ Denied _____ _____

Associate Superintendent/Designee Signature Date