



Pasadena Independent School District
2020-2021

OUT-OF-DISTRICT TRANSFER APPLICATION

Thank you for your interest in enrolling your child in Pasadena ISD through the Limited Open Enrollment program. *Because the application process can take 7-10 days to complete, it is imperative that your child remains enrolled at their current school until you receive confirmation that the transfer is approved.* A district panel reviews all applications. If attendance, grades, discipline, and Special Program availability meet the guidelines established by Pasadena ISD, the application is forwarded to the requested campus. The campus principal makes the final decision on transfer applications.

When turning in your application, you must bring your child's 2019-20 school records (August 2019 – Present). Only complete applications, which include all required documents, will be processed.

Required documents include:

1. **Completed Transfer Application**
2. **Report Card/Grade Report**
3. **Attendance Report**
4. **Discipline Report**

If your child had no discipline issues, please ask their school to give you something in writing, on school letterhead, that states no discipline issues.

5. **Most recent ARD document (Only applicable if student receives Special Education Services)**
6. If applying under the grandparent clause, both the parent and grandparent must provide **two proofs of residence** with the application. The grandparent's address determines the school the student is eligible to attend. **THE PARENT MUST ENROLL THE CHILD.**

Applications should be turned in to PISD Administration Building located at:

Student Services
1515 Cherrybrook Ln
Pasadena, TX 77502



2020-2021

OUT-OF-DISTRICT TRANSFER APPLICATION

FOR OFFICE USE ONLY
<input type="checkbox"/> Employee's Student
<input type="checkbox"/> Grandparent Clause
<input type="checkbox"/> Limited Open Enrollment
<input type="checkbox"/> PEG

NOTE TO PARENTS: Do not withdraw your child from their current school until you receive confirmation that the transfer is approved. Please allow 7-10 days for processing.

Printed Student Name _____ Date of Birth _____

Gender Male Female

Requested PISD Campus	Student's 2020-2021 Grade Level
Student's Zoned Campus (where home is located)	Student's Zoned District (where home is located)
Last Campus of Enrollment	Last District of Enrollment
Is Student Currently Enrolled <input type="checkbox"/> YES <input type="checkbox"/> NO If no, when was student withdrawn? ____/____/____	

Printed Parent/Guardian's Information

First Name: _____ Last Name: _____

Relationship to Student: _____

Street Address: _____

City, State, Zip Code: _____

Home Phone: _____ Cell Phone: _____

Reason for Transfer: _____

GRANDPARENT CLAUSE: If enrolling under the Grandparent Clause, the grandparent's address determines the school the student is eligible to attend. The parent must complete the transfer application in Student Services and enroll the child at the campus. Both the parent and grandparent must provide two proofs of residence with this application.

_____ Parent's initials (only if enrolling under the Grandparent Clause)

Please read the following sections carefully.

DAEP ASSIGNMENT

My child was enrolled, attended or was assigned to a disciplinary alternative education program (DAEP) during the most recent school year and/or previous school year.

Yes No

If you answered yes, please describe the behavior that resulted in assignment to a DAEP.

How did you hear about Pasadena ISD's open enrollment? Friend PISD Staff Social Media Post Social Media Ad
 Movie Commercial Website Other

SPECIAL SERVICES

My child received the following services at his/her most recent school and/or the previous school year.

YES	NO	
		Bilingual
		English as a Second Language Program
		Dyslexia Program
		Gifted/Talented Program
		Prekindergarten
		Section 504 Placement
		RTI Behavior

Special Education

YES	NO	
		Speech
		Academic
		Behavior
		Other

If you answered YES to any of the above Special Education services, please describe.

IF YOUR CHILD RECEIVED SPECIAL EDUCATION SERVICES, ATTACH A COPY OF THE MOST RECENT ARD DOCUMENT.

If you checked YES for the services above, please complete the following, and provide school records describing the nature of the services received in the most recent school year and in the previous school year.

Current School or District: _____

Address: _____

City, State, Zip Code: _____

Contact Person: _____

Name: _____

Pasadena Independent School District
Out-of-District Transfer Agreement
2020-2021

A transfer that would limit the educational opportunities of resident students shall not be approved.

The Superintendent has the authority to accept or reject any transfer request, provided that such action is without regard to race, religion, color, sex, disability, or national origin.

Transportation shall not be provided for out-of-district transfer students.

REVOCATION The Superintendent has the authority to revoke out-of-district transfers as provided in the transfer agreement. Students who transfer into the District shall follow all rules and regulations of the District, including, but not limited to, District policies and regulations, the Student Code of Conduct, and attendance requirements. Failure to fulfill any of these responsibilities may result in the revocation of the transfer agreement.

Please initial the following:

_____ I have included a copy of my child's report card, attendance record, discipline report, and ARD document (if applicable) for the previous school year.

_____ I understand that, if approved, this request is granted conditionally on student behavior. This transfer can be revoked at any time including, but not limited to, during the school year, if my student engages in serious or persistent misbehavior that violates the Pasadena ISD Student Code of Conduct.

_____ I understand that, if approved, this request is granted conditionally on attendance, including tardies. This transfer can be revoked at any time including, but not limited to, during the school year, if my student is truant, accumulates more than 10 absences and/or excessive tardies.

_____ I understand that transportation to and from the assigned school is my responsibility and **my child CANNOT ride the bus.**

_____ I understand that I must apply annually for an out-of-district transfer for my child during the Open Enrollment Transfer period. Failure to do so will prevent my child from attending a Pasadena ISD school.

_____ I understand that falsification of information is a Class A Misdemeanor, which can lead to legal action and will lead to revocation of this agreement.

_____ I have received a copy of the UIL eligibility limitations regulating high school varsity athletics, academic competition, and music competition for nonresident transfers.

_____ Once the student is enrolled in Pasadena ISD, I understand that Pasadena ISD must request records from my child's previous school. This transfer may be revoked if the records received contradict the information I provided with this application.

_____ **Parent/Guardian Signature**

_____ **Date**

Pasadena ISD employees must provide the following information.

Lawson ID # _____ Work Location _____ Job Title _____

GRANDPARENT CLAUSE:

I am the grandparent of the student. I do provide substantial care for the student before and/or after school.

_____ **Grandparent's Signature**

_____ **Date**

FOR DISTRICT USE ONLY

Student ID # _____

APPROVED

DENIED

_____ **Principal Signature**

_____ **Date**

APPROVED

DENIED

_____ **Superintendent Signature**

_____ **Date**