Requesting a Student Transfer

Leverett's Chapel ISD

Parents of students who do not live within Leverett's Chapel ISD boundaries and would like to request a transfer may do so by completing the attached Transfer Request Form and submitting to Campus Principal or mailing to:

Elementary Principal - Nikki Saxton - <u>nsaxton@leverettschapelisd.net</u>
JH/HS Principal- Wayne Borden - <u>wborden@leverettschapelisd.net</u>

Leverett's Chapel Administration Office Attn: Admin- Transfer Request P.O. Box 669 Laird Hill Tx. 75666

With the transfer request form, please attach and send the following:

- Copy of current report card
- Copy of Attendance/Discipline information
- ❖ Verification of student enrollment in public/private school

If you do not have one of the above mentioned items, please include a written explanation as to why the item is unavailable. You will be contacted with a determination at the email address provided on the transfer form. Please allow two weeks from the date of receipt of <u>all</u>* Documentation for review.

*A transfer review will be delayed without the additional required documentation

If you have any questions concerning transfer information, please send an email to:

Campus Principal or call 903.834.6675

Texas Education Agency

Division of Equal Education Opportunity

<u>Application for Transfer</u> 2025-2026

Authority for Data Collection: Texas Education Code 21 061 Civil Action 5281 Section A **Planned Use of Data:** To complete the report required by Federal Court Order Civil Action 5281

Instructions: This form must be used for all student transfers within the State of Texas including hardship based requests.

Please supply the required information and any additional information that you wish the Board to include in its consideration of this transfer request. Your initials on the line below confirm your receipt of a copy of the Leverett's Chapel ISD Transfer Policy, Transfer Tuition, and Transfer Rules regarding Discipline(FDA Local), along with instructions and codes for the use in completing this form.

Student's Name	M/F	Date of Birth		SS#	Grade Entering Into	
This Section must be completed by parent or guardian:						
County in which pupil resides:						
Pupil Lives in				School District.		
Pupil Attended				ISD last year.		
Name of Parent/Guardian:			Phon	ıe #		
Street Address:		City	y,State,Zip			
Contact Email:						
Parent Signature:						
This Section must be completed by the superintendent of the receiving district:						
The Superintendent of Leverett's C	hapel Is	SDApproved/Dis		_the transfer student(s) list	ted above.	
Matthew Everett-Superintendent, Lev	verett's (Chapel ISD	Signature		 Date	

APPLICANT FOR TRANSFER TO LEVERETT'S CHAPEL INDEPENDENT SCHOOL DISTRICT COMMITMENT TO QUALITY SCHOOLS AGREEMENT

By our signature below, my parent(s) and I understand that my application for transfer, if approved, may be reviewed at any time during the school year and that my misconduct or misbehavior may affect my ability to attend school in Leverett's Chapel ISD. My parent(s) and I pledge that:

- I. We want, for me, the privilege of attending school in the Leverett's Chapel ISD.
- II. We share Leverett's Chapel ISD's Commitment to quality schools.
- III. We carefully read and become familiar with the Leverett's Chapel ISD's Student Code Conduct.
- IV. We agree that I will Comply with the Leverett's Chapel ISd Student Code of Conduct.
- V. We understand that Leverett's Chapel Isd evaluates the conduct of all transfer students at any time during the school year.
- VI. We understand that if my conduct is not in compliance with Leverett's Chapel ISD standards, I will not be readmitted.
- VII. We understand that if I am admitted Leverett's Chapel ISD shall not be responsible for my transportation to Leverett's Chapel ISD.
- VIII. We agree that I will make every effort to be an exemplary, model student both academically and in my conduct and behavior.
 - IX. We affirm that I have had no more than (4) unexcused absences in the current or preceding semester and that I have had no more than (1) discipline referral in the current or preceding semester. *If (4) or more absences have occurred, please attach a written explanation.
 - X. We understand that prior to approval of my transfer, we shall furnish to Leverett's Chapel ISD a copy of current report card, attendance/discipline information and a copy of assessment scores. If accepted as transfer, we must provide to the campus a copy of birth certificate, social security card and immunization records.
 - XI. We agree that I am currently passing all coursework and have not failed any subject area in the preceding semester.

Student Signature	Parent Signature		
Additional Student Signature(if applicable)	Additional Parent Signature(if applicable		
 Additional Student Signature(if applicable)	 Date		