

APPLICATION FOR STUDENT TRANSFER
STUDENT TRANSFER DEPARTMENT
HOUSTON INDEPENDENT SCHOOL DISTRICT

ID Number: _____

4400 W. 18th St.

Houston, Texas 77092-8501

Phone (713) 556-6734 Fax (713) 556-6784

NEW

RENEWAL

DATE: _____

STUDENT INFORMATION

Student Name (Last, First, Middle Initial) _____ **Date of Birth** _____ **Gender**
 Male Female

Student American Indian / Alaskan Black / African-American Native Hawaiian / Pacific Islander
 Ethnicity Asian Hispanic / Latino White

Student _____ Street number _____ Street Name _____ Apt# _____ City _____ State _____ Zip Code _____ Home Phone _____
 Address _____

Student Lives with: Mother _____ Father _____ Both _____ Other (Name/Relationship) _____

Father / Guardian Name (Last, First) _____ Work Phone _____ Cell Phone _____ Email Address _____

Mother / Guardian Name (Last, First) _____ Work Phone _____ Cell Phone _____ Email Address _____

Is Parent / Guardian an HISD employee? Yes _____ No _____ If yes, give location: _____

TRANSFER REQUEST

Transfer Request for current year? _____ **or next school year** _____ **Grade for school year of application:** _____

School district in which student resides _____ School student would attend in that district _____

School last attended _____ District _____ School Year _____

Did student use a transfer last semester? Yes _____ No _____ If yes, to which school? _____

To which school is the transfer requested? _____

Reason for Transfer: _____

Signature below certifies that all the information above is true and accurate to the best of my knowledge. If a transfer is granted on false information, it is subject to revocation. I understand that I am making a one year commitment. Transfers must be renewed each year.

Signature of Parent or Legal Guardian _____

SCHOOL/REGION USE ONLY—DO NOT WRITE BELOW THIS LINE

All original Special Transfers must be signed by the Receiving Principal

Receiving Principal's Recommendation

Granted **Denied**

 Signature of Receiving Principal

 Date

TRANSFER DEPARTMENT USE ONLY—DO NOT WRITE BELOW THIS LINE

Application

Granted _____ Denied _____

Reason Denied

 Signature of Student Transfer Department

 Date

Transfer Type: _____