



**LAKE STEVENS SCHOOL DISTRICT
IN-DISTRICT TRANSFER REQUEST APPLICATION**

This application is for a waiver to attend a school other than the student's attendance zone school. Applications may be considered based on Policy 5011. This form **MUST** be completed **ANNUALLY** by the parent/guardian.

Directions: Please complete this form (one form per student) and return it to the Educational Service Center, 12309 22nd Street NE, Lake Stevens, WA 98258, or fax it to 425-335-1549.

Student Information: New Request Annual Renewal For the _____ — _____ School Year

Student: _____ Date of Birth: _____

Parent/Guardian: _____ Home Phone: _____ Work Phone: _____

Mailing Address/City: _____ Zip Code: _____

Physical Address/City (if different from mailing): _____ Zip Code: _____

Email Address: _____

Resident Boundary School: _____ Currently Attending: Yes No

School Requested: _____

Grade (at time of transfer): _____

Student Receives Special Education Services: Yes No

Basis for Requested Transfer:

- The parent/guardian is a full-time employee of the Lake Stevens School District.
- The student's documented child care services are within the requested school's boundary. **Documentation must be provided.**
- Other documented special hardship or detrimental condition. **Please describe and provide the required documentation.**

I understand that if this request is approved, it is the responsibility of the parent/guardian to provide transportation to and from school and that the student must remain in compliance with other district policies, including those relating to attendance, behavior, discipline, and academic standards.

Falsification of information to obtain school assignment may be cause for withdrawal of the student from the requested school. LSSD has the right to periodically verify the information provided.

Parent/Guardian Signature: _____ Date: _____

(To be completed by the Superintendent's Designee)

TRANSFER REQUEST APPROVAL/DENIAL

After reviewing the application above and documentation provided by the parent/guardian, this transfer request is:

Granted for the _____ — _____ school year.

Denied for the following reasons:

Appeal process is found in Policy 5011 on the Lake Stevens School District webpage.

Signature of Superintendent's Designee: _____ Date: _____

c: Parent
Principal