ALPINE SCHOOL DISTRICT REQUEST FOR OUT-OF-AREA TRANSFER

Date of Application _____

Please check appropriate box:		Please check a	opropriate box:	
☐ Early Enrollment Period Transfer Application (Submitted between December 1 and the third Friday in February in order to transfer the following school year.)		☐ Late Enrollment Period Transfer Application (Submitted outside of the early enrollment period.) Please check one and indicate the year requested:		
☐ Year requested, 20		☐ Current year	·	
	i	□ Next year, 20)	
An enrolled nonresident student shall be permitte students, without renewed applications in subsequence. The student graduates or is no longer a Use The student is suspended or expelled from The district determines that enrollment versions.	ient years Jtah resid m school	unless any of the ent	e following occurs:	standards as resic
Student Name	Grad	e Stu	dent#	
ral Address Pho		e	Birth date	
City	State	P4444	Zip	
Boundary School	Requ	equested School		
Current School	_ Reas	eason for Request		
I understand that all transfer requests are conting enrollment school capacity ("adjusted capacity"), s 53A-2-207(4)(c). If this request is granted, I agree t school year. I understand that I, as parent or guardian	pecial pro to leave m	gram limitations y child at the rec onsible for transpo	, staff availability, and/o	or circumstances use end of the requestand from school.
Parent/Guardian Signature		Home Phone	Work Pho	ne
Standard Open Enrollment: □Approved □ I	Denied	Date		
Director of Student Services Date	·	District Admi	nistrator (if required)	Date
► A student may be denied an open enrollment opposition of the consistent with 53A-2-208(3)(b).	oortunity		been suspended or exp	
das the student ever been suspended or expelled fre	om a publ	ic school?	es □No If yes, p	lease explain:
A student with prior behavioral problems may be greement with the school or the school district (1) est arents/student that the student will be excluded from esponsible for the agreement as allowed under Section	tablishing the school	the conditions of if the agreement	continued enrollment and	(2) notifying the
rovisional enrollment: Approved Den	ied	□Approved pe	r attached agreement	