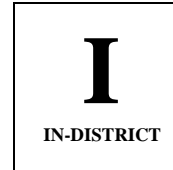


**ROUND ROCK INDEPENDENT SCHOOL DISTRICT  
IN-DISTRICT TRANSFER FORM**



**\*ALL REQUESTED INFORMATION ON THE TRANSFER FORM IS REQUIRED  
FOR PROCESSING AND REVIEW.**

**STUDENT INFORMATION**

**TRANSFER IS REQUESTED FOR \*GRADE \_\_\_\_\_ AND \*SCHOOL YEAR \_\_\_\_\_**

\*Student's Name \_\_\_\_\_ \*Student ID# \_\_\_\_\_

\*Parent/Guardian's Name \_\_\_\_\_

\* Address \_\_\_\_\_

\*City \_\_\_\_\_ \*Zip Code \_\_\_\_\_ \*Hm Phone \_\_\_\_\_ \*Wk Phone \_\_\_\_\_

**\*Is parent/guardian an employee of RRISD \_\_\_\_\_ \*If yes, which school/department \_\_\_\_\_**

**IN- DISTRICT (complete if you live within the RRISD Boundaries)**

\*Sending School \_\_\_\_\_ \*Receiving School \_\_\_\_\_

**\*Reason for Request:**

- \_\_\_ Child Care
- \_\_\_ RRISD Employee Child (if space is available)
- \_\_\_ Last grade in school (5,8,12)
- \_\_\_ Continuation (if space is available)
- \_\_\_ Academy Continuation (current Academy Student) Name of Academy \_\_\_\_\_
- \_\_\_ Moving into attendance zone within **60 days** of transfer request, move-in date \_\_\_\_\_
- \_\_\_ McNeil Health/Sci. Academy (WHS resident only)    \_\_\_ Stony Point Health/Sci. Academy (RRHS resident only)
- \_\_\_ Human Services Academy                                    \_\_\_ Fine Arts Academy
- \_\_\_ IB Westwood (MHS resident only)                            \_\_\_ IB Stony Point (RRHS resident only)
- \_\_\_ Other

**SIGNATURES**

I understand that, if approved, the transfer is granted conditionally on student behavior, academic effort, and attendance, including tardies and that the transfer may be revoked. It is effective for one school year only. I understand that transportation to the requested school is my responsibility. I understand that falsification of information is a Class A Misdemeanor and can lead to legal action. **I have read the summary of the RRISD transfer process and athletic eligibility requirements. More detailed information regarding transfers is contained in RRISD Board Policy. ATHLETIC PARTICIPATION - Students who choose to transfer after December 31, 2007 to another school located outside of their attendance boundary, will be ineligible for Varsity competition in a UIL sport for two years after the date of enrollment into the receiving school**

\*Parent/Guardian Signature \_\_\_\_\_ \*Date \_\_\_\_\_  
(Submit Transfer Request by February 28<sup>th</sup>)

**FOR OFFICE USE ONLY**

Receiving Principal \_\_\_\_\_ Date \_\_\_\_\_ Approve  Disapprove

Sending Principal \_\_\_\_\_ Date \_\_\_\_\_ Approve  Disapprove

Superintendent's Designee \_\_\_\_\_ Date \_\_\_\_\_ Approve  Disapprove

Comments/Reason for Disapproval \_\_\_\_\_

NOTE: Form to be submitted to Central Administration ONLY after the sending and receiving campus principals have signed.