

**2020-2021**  
**SAN ANGELO INDEPENDENT SCHOOL DISTRICT**  
**OUT-OF-DISTRICT or NEW to SAISD STUDENT TRANSFER APPLICATION**

**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED**

San Angelo ISD campuses are open to **NEW** transfer requests for the 2020-2021 school year beginning March 23, 2020 through May 8, 2020. All out-of-district transfers and new to SAISD (including kindergarten) student transfers must be delivered to the Student Services Office via one of the following methods. (1) mail to 1621 University Ave., San Angelo, TX 76904 (2) fax to 325-947-3716 (3) email to [transfers@saisd.org](mailto:transfers@saisd.org)

*If your child has a San Angelo ISD Student ID Number, please complete the online form at <https://forms.saisd.org/Forms/StudentTransferRequest2020>*

\_\_\_\_\_ Grade for 2020-2021 \_\_\_\_\_  
Student Last Name, First Name, Middle Name

\_\_\_\_\_ City/State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Address

\_\_\_\_\_ Student's Age \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Last 4 digits of Student's Social Security # XXX-XX-

\_\_\_\_\_ Name of Current District and Campus \_\_\_\_\_  
**CAMPUS to Which You are Seeking Enrollment**

\_\_\_\_\_ Telephone Number (Home/Cell) \_\_\_\_\_  
Parent Name (Please Print)

Has student been removed to an alternative education program or expelled in the previous school year? \_\_\_ Yes \_\_\_ No If yes, state offense and duration of assignment:

Parent's Email Address: \_\_\_\_\_

**\*\*\*\*\*NOTIFICATION OF DECISION WILL BE SENT BY EMAIL\*\*\*\*\***

A transfer request may be denied if **any** of the following conditions exist:

- The parent/guardian cannot furnish transportation.
- The transfer is to avoid a discipline situation, academic difficulty, or attendance concerns.
- False information is provided on the transfer request.
- Either sending or receiving principal or the Director of Student Services disagrees with the transfer.

Describe why you are requesting this transfer for your child:

***Continued on back***

**Parent Agreement Conditions** (parent must agree to all conditions by initialing and signing below):

\_\_\_\_\_ I understand that I am responsible for delivering my child to campus on time and for picking up my child as soon as the school day is completed. If I do not keep this commitment, my child may be revoked back to the home campus.

\_\_\_\_\_ If attendance problems develop, including tardiness, my student's transfer may be revoked.

\_\_\_\_\_ I understand that if my child becomes a serious discipline problem, my child's transfer may be revoked.

\_\_\_\_\_ I understand that all information received must be true. False information on a transfer request may result in revocation of transfer.

\_\_\_\_\_ I understand that this transfer is a privilege and may be revoked for any parent/student misconduct.

**My signature below authorizes the school districts named above to disclose to each other confidential information regarding the above named student. If completing electronically, I understand that my electronic signature carries the same force and effect as my handwritten signature.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director of Student Services

\_\_\_\_\_  
Date

**SAISD Employees, please complete this section:**

\_\_\_\_\_  
Employee's Current Job Assignment

\_\_\_\_\_  
Employee's Current Campus

***Thank you for your interest in attending San Angelo ISD.***

**FOR OFFICE USE ONLY**

UPDATED MARCH 22, 2020

DATE \_\_\_\_\_

APPROVED \_\_\_\_\_

DENIED \_\_\_\_\_

\_\_\_\_\_ ACADEMIC PERFORMANCE

\_\_\_\_\_ ATTENDANCE

\_\_\_\_\_ CAPACITY

\_\_\_\_\_ DISCIPLINE

HOLD \_\_\_\_\_