



WESLACO INDEPENDENT SCHOOL DISTRICT
 319 West Fourth Street/P.O. Box 266, Weslaco, TX 78599-0266
 In-District/ Out-of-District Student Transfer Request Form



TO BE COMPLETED BY THE PARENT (PLEASE PRINT).

Parent Name: _____
 Address: _____ Email Address: _____
 Home Phone#: _____ Work Phone#: _____ Cell Phone#: _____

By checking this box, I confirm the above address represents the legal residence of this child's parent or legal guardian. Any inaccurate contact information at the time of processing may result in the inability to process your request.

Student's Legal Name	D.O.B	Last 4 Digits of SS #	Home District	Home School Name	Grade 2022-2023
1.					
2.					
3.					
4.					
5.					

Please check here if the child:

	Student Name	Student Name	Student Name
<input type="checkbox"/> Has an IEP (Individual Education Plan) and receives special education services.	_____	_____	_____
<input type="checkbox"/> Has been assigned or pending assignment to the District Alternative Education Program.	_____	_____	_____
<input type="checkbox"/> Is on probation	_____	_____	_____
<input type="checkbox"/> Will be involved in athletic/extra-curricular activities.	_____	_____	_____

Please indicate, if any, your top 3 school choices:
 1. _____ 2. _____ 3. _____
 Parent must provide transportation if school is outside the assigned quadrant.
 Transportation provided by: WISD Parent

By submitting this application, I agree to the following:

- My child will follow all compulsory attendance laws.
- My child will follow the Student Code of Conduct/Student Handbook.
- My child will attend recommended tutoring classes.
- If I am providing transportation, I will ensure my child is on time in the morning and I will pick him/her up on time after school; I will ensure he is at his pick-up location on time.
- I will provide parent support for my child.

Disclaimer: In approving transfers, the Superintendent or designee shall consider the availability of space and instructional staff and the student's disciplinary history and attendance records.

Parent/Guardian Signature: _____
 Date: _____

- Important Information:**
- If your child participates in UIL sports, Texas UIL rules prohibit him/her from participating at the varsity level for 365 days. This is in accordance with Texas UIL rules.
 - Transportation will be provided if student attends a campus in his/her assigned quadrant.
 - If your child is granted enrollment in WISD, permission must be evaluated on a yearly basis.

Documents needed at the intake center to consider approval: 1. Student's Birth Certificate 2. Student's Social Security # 3. Immunization Record 4. Parent/Guardian ID 5. Proof of Residency 6. Current school report card	I have read and agree with the above terms and conditions. _____ Parent/Guardian Signature Date
	(Internal Use Only) The above transfer is: <input type="checkbox"/> Approved <input type="checkbox"/> Denied Receiving Principal's Signature _____ Date _____