



April 8, 2014

The Lake Chelan School District is accepting inter-district transfer requests for the 2014-2015 school year. Agreements are valid for the current school year only and must be resubmitted annually.

If you would like your child to continue his/her education in our district, please:

- Complete the "Inter-District Student Transfer Request Form" included with this letter.
- Take this form to your resident school district to have your child/ren released.
- Submit your signed application with resident district's release to:  
**Lake Chelan School District Office**  
**Attn: Inter-District Transfers**  
**PO Box 369**  
**Chelan, WA 98816**

or you may bring it to the district office at **303 East Johnson Avenue Chelan, WA 98816.**

- **PLEASE RETURN BY: JUNE 20, 2014**

The superintendent will accept or reject an application for nonresident admission based upon the following standards:

1. Whether space is available in the grade level or classes at the building in which the student desires to be enrolled;
2. Whether appropriate educational programs or services are available to improve the student's condition as stated in requesting release from his or her district of residence; and
3. Whether the student's attendance in the district is likely to create a risk to the health or safety of other students or staff.
4. Whether the student's disciplinary records indicate a history of violent or disruptive behavior or gang membership (a gang means a group of three or more persons with identifiable leadership that on an ongoing basis regularly conspires and acts in concert mainly for criminal purposes).
5. Whether the student has been expelled or suspended from a public school for more than ten consecutive days, in which case the student may apply for admission under the district's policy for readmission of expelled students.

Once the form is processed in accordance with District Policy 3141 you will be notified by mail. If you have any questions please call Liz Martinez (509)682-3515.

Thank you.

Rob Manahan  
Superintendent

LAKE CHELAN SCHOOL DISTRICT INTER-DISTRICT STUDENT TRANSFER REQUEST FORM

All requests for inter-district transfers must be coordinated with both the resident district and the Lake Chelan School District. **This form must be completed in the following sequence 1- By the parent or guardian. 2- Signed by the resident school district releasing the student 4- Submitted to Lake Chelan School District for consideration.** Resident school district and parent or legal guardian will be notified by mail. Agreements are valid for the current school year only and must be resubmitted annually.

**Student Information:**

2014-2015 School Year

New Request     Annual Renewal

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mailing Address \_\_\_\_\_

Physical Address(if different from mailing) \_\_\_\_\_

Resident School District & Address \_\_\_\_\_

**Basis for Requested Waiver:**

Financial, educational, safety or health condition affecting the student would reasonably improve as a result of the transfer

More accessible to location of parent's workplace or childcare services

Parent is employee of the nonresident district

Other please describe \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Additional Information:**

Is your child currently being tested for a special program or services (Sp.Ed., Migrant Ed, Bilingual, Gifted or Chapter I/ LAP)?  Yes  No  
If yes, which program or service(s)? \_\_\_\_\_

Is your child already enrolled in a special program or receiving services (Sp.Ed., Migrant Ed, Bilingual, Gifted or Chapter I/ LAP)?

Yes  No

If yes, which program or service(s)? \_\_\_\_\_

Does your child have a history of attendance issues?  Yes  No If yes, is there a Becca Petition in place?  Yes  No

Does your child have a history of disciplinary suspension or expulsion?  Yes  No

Is your child currently under suspension or expulsion?  Yes  No

Are there any health problems the school should be aware of?  Yes  No

I understand that Lake Chelan School District shall deny this request if classes or programs are full, or if my son/daughter is currently suspended or expelled from another school, or if acceptance of the student would result in the district experiencing a financial hardship, or if the attendance of the student could endanger the safety of staff or students. If the transfer is approved, it is further understood that approval may be revoked at any time if my son/daughter does not comply with school rules, or if the student population residing within the district boundaries fills a class or program during the school year.

In the event that either the application for admission to the non-resident district or the request for release from your resident district is denied, you may request the Board of Directors of the respective district to review that decision. You must give at least (5) school business days notice prior to the next regular board meeting in order to have a hearing before the Board (See Appeal Procedure, Policy 3141 - Release of Resident Students).

It is understood that: (1) It is the parents responsibility to provide adequate transportation and supervision to/from the nonresident school, (2) The student must be in compliance with all nonresident school district policies, including those related to attendance, behavior/discipline, and academic standards; and (3) this agreement is for one school year only.

\_\_\_\_\_  
Parent or legal guardian signature, if student  
Is under 18 years of age, or Affidavit of Accuracy.

\_\_\_\_\_  
Date

**To be completed by releasing District:**

I have reviewed the information provided and confirm that this student **does not** have any of the following: (Please check all that apply)

Attendance issues                       Discipline issues                       Health problems                       is not suspended or expelled

Student **does not** participate in the following programs: (Please check all that apply)

SpEd                       Migrant Ed                       Bilingual                       Gifted                       Chapter I/ LAP

The \_\_\_\_\_ School District hereby finds that the above named student(s) request for release meets the resident district criteria and that the student(s) will be best accommodated in the Lake Chelan School District and hereby releases said student, waives attendance claims and state apportionment claims for said student(s) for the \_\_\_\_\_ - \_\_\_\_\_ school year.

I hereby  approve                       deny the request.

\_\_\_\_\_  
Resident District Superintendent

\_\_\_\_\_  
Date

**To be completed by accepting Special Programs Director: (if applicable)**

I have reviewed the applications and verified special programs documentation. I hereby  approve     deny the request.

Signature of Special Programs Director \_\_\_\_\_ Date \_\_\_\_\_

**To be completed by accepting School Principal:**

Subject to the attending school district regulations and of WAC 392-137-100 through WAC 392-137-245.

I hereby  approve                       deny the request.

Signature of Principal \_\_\_\_\_ Date \_\_\_\_\_

**To be completed by Lake Chelan School District Superintendent:**

The Lake Chelan School District AGREES to accept the student for the \_\_\_\_\_ - \_\_\_\_\_ school year.

The Lake Chelan School District DENIES the acceptance of the student due to: \_\_\_\_\_

\_\_\_\_\_  
Signature of Superintendent \_\_\_\_\_ Date: \_\_\_\_\_