

# Out of District Transfer Request



**Spring Hill**  
SCHOOL DISTRICT

## **Out of District Transfer Request Procedure:**

**Note: District policy will not allow out of district transfers after the State of Kansas official enrollment date in September.**

1. Out of District Transfer Request packets are available to parents in the principal's office at each school and at the District Office.
2. Parent/guardians will complete the Out of District Transfer Request Application. Written comments should be provided which describe the reason(s) for requesting an out of district transfer.
3. Return the completed out of district transfer application to the district office at: **101 E. South Street, Spring Hill, KS 66083.**
4. Applicants may request a specific school within the district; however, placement will be determined by the Administration based on current enrollment, staffing, program and other considerations.
5. The Assistant Superintendent will review the application and submit it to a potential receiving Principal.
6. The potential receiving school Principal will contact the student's most current school of attendance and provide a recommendation. Application and recommendation will be forwarded to the District Transfer Committee.
7. The District Transfer Committee will meet to review out of district transfer requests. Written notification of the determination and placement will be provided to parents by the Committee. Reasons for the determination will not be provided.
8. Out of district transfer requests for the succeeding year that are submitted by May 1 will be acted upon by June 1.



## Out of District Transfer Request Application

*District policy will not allow out of district transfers after the State of Kansas official enrollment date in September. Return application to Spring Hill School District Office: 101 E. South St., Spring Hill, KS 66083*

Student Name: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Student Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Cell/Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address (if different than student): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Enrollment year: 20\_\_\_\_/20\_\_\_\_ Grade level of student for enrollment year: \_\_\_\_\_

Last School Attended: \_\_\_\_\_ Last grade completed: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ School Phone: \_\_\_\_\_

### Reason(s) for transfer request:

Please attach a letter which thoroughly, but succinctly, outlines the reasons for requesting a transfer to the Spring Hill School District. Include any plans for moving into the district with supporting documents, if necessary. Please include reasons for leaving last school attended and any current connections to the district.

### School Requested:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Spring Hill High   | <input type="checkbox"/> Wolf Creek Elementary    | <input type="checkbox"/> Spring Hill Elementary |
| <input type="checkbox"/> Spring Hill Middle | <input type="checkbox"/> Prairie Creek Elementary |   |

Note: Consideration will be given to requests; however, placement will be determined by current enrollment, staffing, program space and other factors.



## Out of District Transfer Request Application Response

### Receiving School Principal's Comments:

- ☐ Recommend transfer based on available information.
- ☐ Recommend transfer with reservation.
- ☐ Transfer not recommended based on available information.

\_\_\_\_\_  
Receiving Principal Signature

\_\_\_\_\_  
Date

The school district reserves the right to cancel, revoke or rescind transfer requests at any time.

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### District Transfer Committee Action:

- ☐ Request for transfer **APPROVED** for school year.
- ☐ Request for transfer **DENIED** for school year

\_\_\_\_\_  
Committee Chairperson Signature

\_\_\_\_\_  
Date

