

Portage Public Schools

TRANSFER APPLICATION FROM NON-RESIDENT DISTRICT 2011-2012

Mail, deliver, or fax this form to the attention of Sarah Baker at the Portage Administration Office, 8111 S. Westnedge Ave., Portage 49002 (fax: 269-323-5001). You will be notified in writing about the status of your application.

Student Name _____ Grade in 2011-2012 _____ Date of Birth _____

Address _____ City _____ Zip _____

Parent/Guardian _____ Telephone: Home _____ Work _____

Cell _____ E-Mail ID _____

Student lives with _____ Is this the legal guardian? _____

In what school District does the student live? _____

What school is the student currently attending? (if applicable) _____

What school are you requesting in Portage? _____

Does the student currently receive Special Education Services? Yes No

Does this request include siblings? Yes No

If Yes, name(s) and grade level(s) _____

Please describe the reason(s) you are requesting a transfer into the Portage District and attach any relevant documentation.

This request is not for athletic purposes. _____ (Initial Here)

Should this transfer request be approved, **I take full responsibility for transportation of my student(s) and understand I must submit this request on a yearly basis for subsequent releases.**

Parent Signature _____ Date _____

Parent Signature _____ Date _____

NOTE: Athletic eligibility at the high school level may be affected by this choice. Information concerning athletic eligibility is available from the Athletic Director in the receiving School District.