

**EAST ALLEN COUNTY SCHOOLS
2021-2022
SCHOOL CHOICE TRANSFER FOR CURRENT EACS RESIDENT**

Submit by March 31, 2021 for priority consideration.

PLEASE PRINT

Application to Attend (School): _____ **for (2021/2022) grade** ____.

(Student last name)

(Student first name)

(Home Address including St., Rd., Dr., etc)

(City)

(State)

(Zip)

Current School): _____

I understand it is the responsibility of the parent to provide transportation to/from the school when applying as a CHOICE transfer. (Exception: Gr 9-12 students living in Harding attendance area) Yes ___ No ___

Does this student currently have an IEP and receive Special Ed Services? Yes ___ No ___

Does this student currently receive English Learner (EL) Services? Yes ___ No ___

LIVES With (check all that apply):

Both Parents Father Mother Court-Appointed Guardian(s)

Other (Describe): _____

#1 Household Adult Name (Last, First)

Best Phone Number

#2 Household Adult Name (Last, First)

Best Phone Number

Does this student have any siblings/household members also applying for a Choice Transfer for the 2021-2022 school year? If yes, please list names/grades below. (IMPORTANT: A separate application must still be completed for each student.)

Does this student have any siblings/household members already attending the SAME SCHOOL the student is APPLYING TO? If yes, please list names/grades below.

(Student last name)

(Student first name)

Please use the following lines to explain why this transfer will be beneficial to the student:

Four horizontal lines for student explanation.

**Important Information.
Read Before Signing This Application.**

FULL-YEAR ENROLLMENT COMMITMENT: Students must remain at the transfer school for at least one school year.

CONTINUED ENROLLMENT: Once approved, students will remain enrolled in the attendance area of the transfer school in subsequent years without re-applying each year. A choice transfer form will be required anytime a request is made for the student to transfer to a different attendance area, even if that transfer would result in the student returning to his/her home attendance area.

ATHLETIC ELIGIBILITY: High school students receiving a transfer MAY NOT BE ELIGIBLE to compete in varsity sports the first year. Contact the high school Athletic Director with questions concerning IHSAA athletic eligibility.

TRANSPORTATION: Beginning with the 2015-2016 school year, students who do not attend the school within their home attendance area (due to a Choice Transfer) will not be eligible for transportation. (Exception: Students may be eligible for busing to a daycare address within the choice school's attendance area.)

ACADEMIC, ATTENDANCE, AND BEHAVIOR EXPECTATIONS: All approved Choice Transfers require the student to follow the academic, attendance, and behavior expectations of the Choice school.

My signature below indicates I have read, understand, and consent to the requirements of the Choice School Transfer Application.

Parent/Legal Guardian Signature

Date

PLEASE RETURN THIS FORM TO:

EAST ALLEN COUNTY SCHOOLS
STUDENT SERVICES

**FOR PRIORITY CONSIDERATION,
FORM MUST BE RECEIVED BY:**

800 HOMESTEAD DR.
NEW HAVEN, IN 46774

March 31, 2021

FAX (260) 446-0116

**You will receive notice of the application outcome via U.S. Mail
by April 30, 2021.**

For Office Use Only. Spec Ed Approved/Denied _____ Date: _____

Student Services Date Received: _____ Approved/Denied _____ Date: _____