INTRA-DISTRICT Choice Form (Request for Release between schools within CFSD)

This release must be renewed annually for the following student by the parent/guardian or student 18 years or older or emancipated. Transfers can only take place at the beginning of the school year or at the Semester with the approval of the administrators.

School Year _____________

Student Name: ____________________________Date of Birth: ___/___/____ Grade : _____ Gender: M or F

Parent or Guardian Name: ____________________________________________________________

Address of Student: ____________________________ City _____________ State______ Zip ________

Home Phone ( ) ____________ Cell Phone: ( ) ____________ Work Phone ( ) ____________

Resident School (which school is closest to your house?) □ Clallam Bay School □ Neah Bay School

Basis of request for release:

☐ Open Enrollment - Parents have selected this school for personal or other reasons.

☐ School Choice (State Law) Parents have selected this school because the student’s resident school has failed to meet AYP requirements. (Currently only students grades 6-12 transferring from NB fit this category)
  - School Choice based on the provisions of RCW 28A.225.310- from OUT of DISTRICT are covered under a separate form. This form is for In-District Transfers Only

☐ Persistently Dangerous School (Federal Requirement for NCLB). Parents have selected this school because the student’s school of geographic residence has been identified as “Persistently Dangerous” as defined in No Child Left Behind. CFSD does NOT have any schools identified as “Persistently Dangerous”.

Parent or Guardian Signature: ____________________________ Date: ________________

Section 2- to be completed by NON-Resident (Receiving) School.

Request for Admission is: _____ APPROVED _____DENIED (if denied the reason for denial) ____________________

__________________________ Date: ________________

Signature of Non-Resident School Official

Section 3- to be completed by Resident (Sending) School.

________ Request for release meets criteria and is Approved for school year ending ____________.

________ Request for release is denied for the following reason(s): ____________________

__________________________ Date: ________________

Signature of Resident School Official

09/2016