The Iola ISD Board of Trustees delegates to the Superintendent the authority to accept or reject any transfer request, provided that such action is without regard to race, religion, color, sex, disability, or national origin.

A nonresident student wishing to transfer into the district shall file an application for transfer with the superintendent’s secretary by August 1st of each school year. Applications for transfer submitted after August 1st will only be considered if there are extenuating circumstances.

All students shall be considered for transfer into the district on an individual basis in accordance with federal court orders, current board policy, and state laws and regulations. In order to transfer into the district, a student must:

A. have a good discipline record;

B. have attended another Texas school district for one full year (with the exception of kindergarten applicants);

C. if home schooled, provide documentation from previous schools; and

D. may not be a pre-k student.

An Interdistrict Transfer Committee composed of the high school principal, the elementary principal, and two teachers from each campus will meet and review each transfer request. The following information must be submitted to the Interdistrict Transfer Committee upon the initial request for transfer into the district:

A. a complete application;

B. a letter from the parent stating the student’s name, age, grade and reason for requesting the transfer;

C. a transcript (including standardized test scores -STAAR, EOC, etc.) from the current school the student is attending along with a complete address and telephone number of that school;

D. a letter of recommendation supporting the transfer;

E. a copy of the student's discipline record; and

F. a copy of the student's attendance record.
After reviewing the transfer request, the committee will make a recommendation to the superintendent to accept or reject the transfer request. The superintendent will review the committee's recommendation and either accept or reject the transfer request. Once a decision has been made, the parents will be notified in writing.

The Interdistrict Transfer Committee will also review the progress of transfer students throughout the school year. If the committee determines there is a problem with a student's behavior or if the student has excessive absences or tardies, the parent will be contacted. If the behavior continues, a student's transfer may be revoked and the student could be withdrawn to return to his/her home district.
Iola ISD Transfer Form

School Year: 2020-2021

Parent’s Name _________________________________________ Phone # ____________________________

Mailing Address __________________________________ City ____________________ State ________ Zip ____________

Physical Address ___________________________ City ____________________ State ________ Zip ____________

<table>
<thead>
<tr>
<th>Student Name</th>
<th>DOB</th>
<th>SS#</th>
<th>Race</th>
<th>Grade</th>
<th>Sending District</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Reason for Requesting Transfer:

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

This section must be completed by the receiving district superintendent:

The above transfer(s) was APPROVED DISAPPROVED on this the _________ day of _____________, 20____

__________________________________________________________
Signature of Superintendent

Student Transfer Policy

“A Transfer student who becomes a discipline or attendance problem shall have their transfer agreement revoked; written notification shall be sent to the school district of residence.”

Parent or Legal Guardian ____________________________ Date ____________________________