



Dear Parent(s) / Guardian(s),

We are pleased that you are considering Farmersville Independent School District as an educational option for your child. Farmersville ISD is steeped in tradition, pride, and unity, and we fight to provide every student with the foundation to fulfill their potential so they will have the opportunity and confidence to dream big.

The following items are required before the transfer committee will review and consider the transfer application. The district's superintendent of schools or his designee has final authority on all transfer approvals. Please return the following items to the Farmersville ISD Administration Building located at 501A Highway 78 N, Farmersville, Texas 75442, or you may email them to bdrayer@farmersvilleisd.org:

- 1) Completed Student Transfer Request Application
- 2) Attendance records for the prior twelve months from previous district
- 3) Discipline records for the prior twelve months from previous district
- 4) Most recent report card from previous district
- 5) Most recent STAAR Report Card (available from <https://txparentportal.emetric.net/>)

Thank you for considering Farmersville ISD as the educational destination for your child.

Sincerely,

A handwritten signature in black ink, appearing to read 'Micheal French', written over a white background.

Micheal French
Superintendent

Farmersville ISD

2023-2024 Student Transfer Request Application

Student Information		
Last Name	First Name	DOB
Student ID#	District you reside in	Grade Level for 2023/2024

Parent / Guardian Information		
Last Name	First Name	Email
Street Address	City	Zip
Relationship to Student		Preferred Contact #:

Additional Parent / Guardian Information		
Last Name	First Name	Email
Street Address	City	Zip
Relationship to Student		Preferred Contact #:

Student Special Programs:

- | | | |
|---|--|------------------------------------|
| <input type="checkbox"/> N/A (Not Applicable) | <input type="checkbox"/> 504 | <input type="checkbox"/> Bilingual |
| <input type="checkbox"/> Dyslexia | <input type="checkbox"/> ESL | <input type="checkbox"/> Speech |
| <input type="checkbox"/> Gifted & Talented | <input type="checkbox"/> Special Education | |

For special education, please specify:
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Parents must provide the following records with this completed application:

- 0 Attendance records for the prior twelve months from previous school and/or district
- 0 Discipline records for the prior twelve months from previous school and/or district
- 0 Most recent report card from previous school and/or district
- 0 Most recent STAAR Report Card (available from <https://txparentportal.emetric.net/>)

Incomplete applications *will not* be processed.

Student Transfer Agreement

In approving transfers, the Superintendent or designee shall consider availability of space and instructional staff and the student's disciplinary history, attendance records, and academic records.

The Superintendent has the authority to accept or reject any transfer requests, provided that such action is without regard to race, color, sex, disability, national origin, or ancestral language.

Transfers shall be granted for one regular school year at a time. Transportation will *not* be provided for transfer students.

A student shall not be allowed to transfer into the District if he or she has not performed at or above grade level on the most recent state-mandated assessment and satisfied requirements for all academic courses from the previous school year, except in the case of a student eligible for special education services. Such student's academic records shall be reviewed on an individualized basis, against the student's IEP and other relevant factors.

A transfer student shall follow all rules and regulations of the District. Violation of the terms of the agreement may result in a transfer request not being approved the following year.

By signing below, I acknowledge that I have received and understand the terms of the Farmersville ISD transfer agreement.

Student Name: _____

Student Signature: _____

Parent Name: _____

Parent Signature: _____

Date: _____

OFFICE USE

ONLY: *Approved by:* _____

Date: _____