

PERRY TOWNSHIP SCHOOLS
Application for Intra-District Transfer
Elementary Level

Perry Township Schools ("PTS") allows the parent/guardian of resident students, and if an employee of PTS, the parent/grandparent/guardian of students, at the elementary level to apply for intra-district transfer. By submitting this Application, the parent(s) (or in the case of a PTS employee, the grandparent(s), if applicable) or the guardian(s) of the student set forth in this Application agree(s) to all of the terms and conditions set forth on the second page of this Application, **including, but not limited to, the agreement of such parent(s), grandparent(s), if applicable, or guardian(s) to provide, or cause to be provided by someone other than PTS, the student's transportation to and from the requested school.** If approved, the student is permitted to attend an elementary school other than the student's boundary school. The approval is contingent upon the guidelines listed on the second page of this Application and the requirements and procedures set forth in the Intra-District Elementary School Transfer Program located on the PTS website (the "IDEST Program"). Further, both the Boundary School and the Requested School principals must agree to the transfer.

Name of Student _____ **Date of Birth** _____

Perry Township Student ID # _____

Name of Parent/Guardian _____

Telephone # _____

Home Address _____

City _____ **State** _____ **ZIP Code** _____

Is an employee of Perry Township Schools the parent, grandparent or guardian of the student? _____

If yes, please provide the name of the employee and in which building the employee works _____

School Currently Attending _____

Boundary School (Transferring From) _____

First School Transfer Requested (Transferring To) _____

Second School Transfer Requested (Transferring To) _____

Grade level for 2023-2024 school year _____

Does the student have an IEP or 504? _____

Does the student have one or more siblings applying to participate in the IDEST Program for the 2023-2024 school year? _____

If so, please provide the full name(s) of each sibling who is applying _____

(COMPLETE AND SUBMIT ALL PAGES)

	_____	_____
	Parent/Guardian Signature	Date
<input type="checkbox"/> Approve	_____	_____
<input type="checkbox"/> Deny	_____	_____
	Principal of Boundary School of Student	Date
<input type="checkbox"/> Approve	_____	_____
<input type="checkbox"/> Deny	_____	_____
	Principal of Requested School	Date

District Authorization:

<input type="checkbox"/> Approve	_____	_____
<input type="checkbox"/> Deny	_____	_____
	Assistant Superintendent	Date

Rationale for Why You Are Requesting Transfer: Please explain below your reason for wanting your child to attend the transfer school.

The following terms apply to the intra-district transfer opportunity:

- The parent must provide a rationale for the transfer request in the space provided on this Application.
- The student's parent/grandparent, if applicable/guardian will provide, or caused to be provided by someone other than the PTS, the student's transportation to and from requested school.
- Program/classroom space must be available in the requested school without overcrowding students with legal settlement.
- The student may not be currently expelled or suspended.
- The student's parent/guardian must sign a release of record to allow the requested school to review the student's academic, attendance, and disciplinary record.
- The principal of the school where the student resides must be in agreement of the transfer request and the principal of the requested school must be in agreement for the transfer application to be approved.
- If a transfer request is denied, the student/parent may appeal the decision to the Assistant Superintendent. This appeal process is explained on the back of this application.
- If the transfer application is approved, the student/family must make a one-year commitment.
- Transfers may be withdrawn after the current school year or at any time the parent/guardian does not comply with this agreement.
- The parent(s)/grandparent(s), if applicable/guardian(s) acknowledge(s) that each eligible request for transfer stands on its own, and no consideration will be given, or attempt made, by PTS to ensure siblings attend the same PTS elementary school when granting requests under the IDEST Program.
- In addition to the foregoing, the parent/guardian agrees to, and acknowledges, all of the requirements, procedures and acknowledgments set forth in the IDEST Program.

Appeal Process:

1. If your transfer request is denied, you may appeal the decision.
2. Your appeal must be filed within five (5) business days from the date you are informed of the denial. The principal will note the denial date when he/she contacts the parent/guardian.
3. An appeal must be filed with the Assistant Superintendent for Foundational Learning, Perry Township Education Center, 6548 Orinoco Avenue, 46227; 317-789-3724.
4. Upon receiving an appeal, the Assistant Superintendent will schedule a conference with the parent/guardian within five (5) business days.
5. After conducting the conference and hearing the appeal, the Assistant Superintendent will make a ruling within two (2) business days and inform the parent/guardian.