



Carrie D. Newnam  
Director of Student Accounting

Dr. Rick Cobb  
Superintendent

4731 Judy Dr  
Del City, OK 73115  
(405) 671-8615  
(405) 582-7096 Fax

Mailing Address:  
P.O. Box 10630  
Midwest City, OK 73140  
Fax: (405) 739-1615

## 2021-2022 Open Transfer Application Instructions

Applications for Open Transfer into Midwest City-Del City Public Schools will be accepted from January 4, 2021 through May 31, 2021 only. The following items must be submitted in order for an application to be considered complete:

- State Department of Education Open Transfer application
- Attachment A: Student Information Questionnaire
- Attachment B: Consent for Cancellation of Transfer
- Attendance and discipline records for the current school year (not applicable if the student will be in the pre-kindergarten or kindergarten grade and entering public school for the first time)
- Current I.E.P. if student is identified as in need of special education services (if applicable)

**An incomplete packet will result in the denial of the transfer. Please submit all required documents!**

All Open Transfer applications and applicable attachments must be submitted online at [enrollment@mid-del.net](mailto:enrollment@mid-del.net), faxed to 405-582-7096 or delivered to the Mid-Del Student Learning and Services Center, located at 4731 Judy Dr. in Del City, no later than 4:00 p.m. on May 31, 2021. If you would like to apply online or print the forms you may visit our website at [www.mid-del.net](http://www.mid-del.net) and click on the links attached. All completed applications will be date and time stamped as received and will be considered on a first come, first serve basis.

Completed applications will be reviewed and approved or denied by site principals based on criteria including teacher to student ratios, attendance rates, and discipline history. Although requests for transfer to a specific school site are considered, transfers are approved to the *district* only. Notification of the assigned school will be given at the time of approval. **Principals cannot make any decision regarding the approval or denial of the transfer requests until after May 31, 2021.**

Written notice of the approval or denial of a transfer request will be mailed to the address provided on the transfer application no later than **July 15, 2021**. If the transfer request is approved, the approval letter, along with all other required documentation, must be submitted during the time of enrollment. Please visit our district website at [www.mid-del.net](http://www.mid-del.net) for dates of enrollment.

If lost or misplaced, additional copies of the approval letter may be requested from the Student Accounting Department by calling (405) 671-8615 ext. 4410. Once requested, the approval letter copy will be available to be picked up at the Mid-Del Learning and Services Center after a period of up to three (3) business days.

### *Mission Statement*

When the young people of Mid-Del enter our schools, they will be **safe**.  
When they enter our classrooms, they will be **challenged**.



Parent's Application for a Student Open Transfer for School Year 2021-2022

Instructions:

- No later than May 31st of the school year preceding the year the transfer is desired, parent/guardian may file an Open Transfer application to the Receiving District.
No later than May 31st of the same year, the Receiving District must notify the resident district that a transfer application has been filed, and notification is via the Receiving District entering applications in the Wave online no later than May 31.
No later than July 15th the Receiving District's board of education shall approve or deny Open Transfer applications, verified by entering the decision in the Wave online, and must notify the parent/guardian of their transfer decision.
No later than August 1st a parent/guardian who was notified of an approved Open transfer shall provide written notice to the Receiving District that their child/student will be enrolling in the receiving district. [70 O.S. § 8-103] [OAC 210:10-1-18 (d) (4) ]

Receiving District (transfer to)
County Name Oklahoma
District Name Midwest City-Del City Public Schools
School Site Requested
Sending/Resident District (transfer from)
County Name
District Name
School Site
Check here if child is currently Home Schooled. [ ]

Student Information

First Middle Last Birth Date
Grade Level in Transfer Year IEP\* (Yes/No) Date for IEP Meeting

\*Receiving District: If above answer is "yes" that child is currently on an Individual Education Program (IEP) a representative from both districts must be present for an IEP meeting to discuss the student's IEP needs. Applicable records must be submitted from the student's last school to the Receiving District, and shall be maintained by both districts in accordance with federal and state laws. An "IEP Service Agreement" does not constitute a transfer under the Education Open Transfer Act and should not be formalized by using this form.

PARENT/LEGAL GUARDIAN MUST COMPLETE AND SIGN:

First and Last Name Email (optional)
Street Address City Zip Code
Home Phone (Area Code) Alternate Phone (Area Code)

- 1. Does the child names on this Parent application for Transfer have a multiple-birth sibling (twin, triplet, etc) already attending this same receiving district on an Open transfer previously approved? [ ] Yes / No [ ]
If "Yes" enter Sibling(s) Name(s):
2. Is this parent/legal guardian who is requesting this open transfer a TEACHER employed by this Receiving District (70O.S. 1-113)? [ ] Yes / No [ ]
3. Is this parent/legal guardian requesting this open transfer specifically to a receiving district that provides a SPECIALIZED DEAF EDUCATION PROGRAM? [ ] Yes / No [ ]
4. Is this parent/legal guardian requesting this open transfer a member of the active uniformed military services of the United States and on Full-time active duty status or active duty orders? [ ] Yes / No [ ]

An Open Transfer may occur outside of statutory time frame with documentation provided when above questions 1, 2 or 3 are "Yes."

Pursuant to the provisions of the statutes of the state of Oklahoma, and the rules and regulations of the State Board of Education, application is hereby made to permit the child listed on this form to transfer from their resident Sending District to the Receiving District as indicated on this form. The parent/guardian applicant verifies by their signature (below) that he/she is the custodial parent or legal guardian of the child/children listed above and hereby acknowledges that if this transfer application is approved, the parent/guardian shall be bound by the Compulsory School Attendance Laws of Oklahoma rules and all regulations of the Receiving District named on this transfer application.

SIGNATURE of the Parent/Guardian Date
Received by district on The Receiving District decision must be no later than July 15.

Approve [ ] Deny [ ] Cancel [ ] Receiving District Superintendent's Use Only
Signature Date

**Attachment “A”  
Open Transfer Application Information**

*(We must have a separate “application information” form for each student. Do not combine students)*

Completion of this form is required of each applicant for a transfer in order to apply the criteria of this policy. Failure to fully and truthfully complete and timely submit this form to the District will result in a denial of the transfer. Completion of this form will be in addition to completion of any form required by the State Board of Education.

1. Full and legal name of student: \_\_\_\_\_
2. Student’s date of birth: \_\_\_\_\_
3. Name of parent or legal guardian of the student: \_\_\_\_\_
  - a. Address: \_\_\_\_\_
  - b. City , State , Zip: \_\_\_\_\_
4. Education history of the student school in which the student is currently enrolled):
  - a. School: \_\_\_\_\_
  - b. Address: \_\_\_\_\_
  - c. Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
  - d. Dates of Attendance: \_\_\_\_\_
5. Current age and grade of student: Age: \_\_\_\_\_ Grade: \_\_\_\_\_
6. Is this student currently on a transfer? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, to what district: \_\_\_\_\_  
\_\_\_\_\_
7. Courses in which the student desires to enroll in each semester in the coming school year:  
\_\_\_\_\_  
\_\_\_\_\_
8. Does the student have a disciplinary record for violating school regulations? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, state school(s) in which each violation occurred and approximate date(s) of violation(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Has the student ever been suspended from school or placed in an alternative education program or setting for disciplinary reasons? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, for each suspension and alternative program or setting, state the school which suspended or placed the student, the nature of the offense, and approximate date of the suspension or placement, if different from above:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Regulation: C-14 R-1**

10. Has the student been adjudicated as a delinquent for an offense that is not a violent offense under relevant Oklahoma Law? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state the name of the court making the adjudication, the time of such adjudication, the nature of offense, whether the student is still under any court supervision, and, if so, the name of the person overseeing such supervision: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Has the student been adjudicated as a delinquent for a violent offense under relevant Oklahoma Law? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state the name of the court making the adjudication, the time of such adjudication, the nature of offense, whether the student is still under any court supervision, and, if so, the name of the person overseeing such supervision: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. Has the student been convicted as an adult for an offense defined in relevant Oklahoma Law as an exception to a nonviolent offense? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state the name of the court in which the conviction was entered, the time of the conviction, the nature of the offense, the sentence imposed, whether the student is still under any court supervision, and, if so, the name of the parole officer or other supervisor: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. Has the student been convicted as an adult for an offense defined in relevant Oklahoma Law as a violent offense? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state the name of the court in which the conviction was entered, the time of the conviction, the nature of the offense, the sentence imposed, whether the student is still under any court supervision, and, if so, the name of the parole officer or other supervisor: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
14. Has the student committed on school property, in school transportation, or at a school event a violent act or an act showing deliberate or reckless disregard for the health or safety of faculty or others? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state the district attended when the act occurred, the approximate date of the act, and describe what occurred: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Regulation: C-14 R-1**

15. Has the student possessed on school property, in school transportation, or at a school event an alcoholic beverage, low-point beer as defined by relevant Oklahoma Law, a wireless telecommunication device, or been involved with missing or stolen property found to have been taken from a student, school employee, or the school during school activities: Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, for each separate act, state the district attended when the act occurred, the approximate date of the act, and describe what occurred: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Has the student possessed on school property, while in school transportation, or at a school event a dangerous weapon or a controlled dangerous substance as defined by relevant Oklahoma Law? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, for each separate act, state the district attended when the act occurred, the approximate date of the act, and describe what occurred: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. If the student has been identified as a child with a disability, this District will need to review all such records to make a reasonable determination of whether the District has the facilities, programs, staff, and space to implement the student's current or anticipated IEP, and, if preliminary approval of a transfer is made, to conduct the statutorily - required joint IEP conference with the resident district. Is the student currently, or has the student been, a child with a disability who received an Individualized Education Program? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, briefly describe the nature of the disability, the approximate time period in which the student has been or was under an Individualized Education Program (IEP), and the names of the school districts which implemented the student's IEP: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

18. Do you agree to allow this District to review all educational records of the student from all previous schools attended by the student? Yes \_\_\_\_\_ No \_\_\_\_\_

19. Do you understand that transportation between home and school is the responsibility of the parent?  
Yes \_\_\_\_\_ No \_\_\_\_\_

20. Do you understand that if the transfer is approved, the transfer is to the district, not a specific school, and the district will place students based on staff/programs/space or other district criteria? Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

**Attachment “B”**

**Transfer Student Consent to Cancellation of Transfer**

The undersigned, who is not a resident of this school district, recognizes:

1. That the undersigned student has a right by law to attend the school district of residence;
2. That the nonresident student desiring to enroll in this school district has no statutory right to attend this District;
3. That the District is not required to accept this transfer application; and,
4. That the District does not desire to accept a transfer of a student who will detract from the educational process of resident students or take the place of another transfer applicant who would not detract from that process.

The undersigned hereby agrees that if the District approves a transfer allowing the undersigned student to enroll in the school district, the administration of the District has the consent of the undersigned to cancel the transfer during the approved enrollment school year if:

1. The student fails to comply with student behavior rules set by the District, school, or teacher;
2. The parent or student 18 years of age or older fails to promptly pay financial obligations owed to the District, including, but not limited to, payments owed for school lunches and for lost or destroyed school property;
3. The student does not have a valid excuse for failure to attend school;
4. The student is habitually late to arrive at school, or delayed in being picked up after school; or,
5. The student’s family becomes a disruptive influence for the staff or other students.

The undersigned also is informed that this consent to cancellation is a necessary component for continued enrollment after transfer acceptance, and thus the consent may not be withdrawn at any time in the future.

The undersigned also understands that although the administration will notify the parent or student 18 years of age or older of any cancellation, the undersigned understands and agrees that the determination of the administration that a cancellation is to be effected will be final, that the undersigned will have no right to appeal that determination to the Board of Education, and that after cancellation the administration will send the educational records of that student to the student’s resident school district or to such other school district as the undersigned directs.

**Regulation: C-14 R-2**

By signing this agreement, I affirm that I have read and understand the above conditions concerning acceptance of the transfer application and my consent to district authority to cancel the transfer, if granted, for the reasons stated above.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

---

Printed name of student

---

Signature of Student

---

Print name of Parent

---

Signature of parent applying for a transfer