Ridgefield School District #122
510 Pioneer Street, Ridgefield, WA 98642
360-619-1315 Fax: 360-619-1397

In-District Boundary Transfer 2021-2022

Application forms for students requesting a transfer between Union Ridge and South Ridge Elementary Schools will be accepted April 12th through May 3rd and reviewed at the end of May. Applications received after the May 3rd deadline will be placed on a waiting list and may not be processed until the end of August. Transfer requests for Kindergartners will most likely not be processed until late August.

New students must register through their resident elementary school prior to applying for an In-District Boundary Transfer.

COMPLETED FORM MAY BE SUBMITTED IN PERSON, BY MAIL, FAX, OR EMAILED TO: tonia.rice@ridgefieldsd.org

Resident School: _____ Requested School: _____	☐ New Request ☐ Renewal

STUDENT INFORMATION *(one form per student)*

Student's Legal Name: _____ (LAST) (FIRST) (MIDDLE)	Birth Date: _____ Grade Level: _____ *(of transfer year)*
Parent/Guardian's Name: _____ Parent/Guardian's Email: _____	Relationship to Student: _____ Primary Phone: _____
Current or Last School Attended:	Alternate Phone: _____

Reason for transfer request: _____

_____

Residence Address: _____ _____	Mailing Address: *(if different from residence)* _____ _____

I understand that all boundary exceptions and transfers are for all or part of the current school year in which an application is accepted. Applicants for nonresident and in-district admission must complete a new application for each school year. ***I also understand that if a nonresident or in-district student is accepted, the student's parent/guardian is responsible for providing transportation for the accepted student.*** _____***(INITIAL HERE)***

Signature of Parent/Guardian _____ *Date* _____

FOR SUPERINTENDENT'S USE ***FORM RECEIVED:____***

The Ridgefield School District

☐ AGREES to accept the in-district boundary transfer to the requested school.

☐ DENIES this application due to the lack of available space in the requested grade level.

_____ _____

Superintendent/Designee *Date of Approval/Denial*

Reference: Board Policy File 3131
Updated: 03.04.2019