Klamath County **School District**

Code: **JECB-AR(2)**Revised/Reviewed: 2/20/14; 8/20/15; 2/19/16; 2/15/18; 2/26/19; 2/18/20, 2/18/21; 2/17/22; 2/23/23

Orig. Code(s): FORM A

Request for Nonresident Student Admission - Interdistrict Transfer with **Consent of Both Affected Districts**

(KCSD/Resident Interdistrict Transfer) (Please Clearly Print)

Parent/Guardian Email Address:	School Year: 2023 - 2024	
Student Legal First Name: Student Legal Middle Name: Student Date of Birth: Enrolled Grade Level for 2022-2023: Enrolled Grade Level for 2023-2024: Mailing Address: City: State: Zip: Parent/Guardian Email Address: Primary Phone of Parent/Guardian: Secondary Phone: Parent/Guardian Name (Person in Parental Relationship): Yes My child currently has a sibling attending a school within the Klamath County School District? Please include the Name of student and school attending: No My child does not have a sibling attending a school within the Klamath County School District. Is the student currently under expulsion? Yes No If yes, what was the reason? Expelled from which district/school: I hereby certify the information I have provided is true and I understand that falsely responding to any of the questions herein will result in denial and/or revocation of this application. I certify that I am the parent or guardian in legal custody of the student. Signature of Parent/Guardian: Date: Note: If your student is currently or planning to participate in an OSAA sanctioned activity/sport it is strongly recommended that you contact the Administrator/Athletic Director at the school you are requesting to determine if the student will be eligible to participate. For Office Use Only: Nonresident District: Date: Final Action of District: Approved Denied Wait List Lottery Number Reason or comments: Resident District: Date: Final Action of District: Approved Denied Wait List Lottery Number	Resident School/District:	Requested School:
Student Legal Middle Name: Student Date of Birth:	Student Legal Last Name:	
Student Date of Birth:	Student Legal First Name:	
Mailing Address:	Student Legal Middle Name:	
Mailing Address:		
Parent/Guardian Email Address: Primary Phone of Parent/Guardian:		Enrolled Grade Level for 2023-2024:
Primary Phone of Parent/Guardian:	City:	State: Zip:
Primary Phone of Parent/Guardian:	Parent/Guardian Email Address:	
My child currently has a sibling attending a school within the Klamath County School District? Please include the Name of student and school attending:		
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Expelled from which district/school: Expelled from which district/school:	□ No My child does not have a sibling	g attending a school within the Klamath County School District.
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