



Westside Community Schools  
 District 66 Administrative Office  
 909 South 76<sup>th</sup> Street, Omaha NE 68114-4519  
 402-390-2100

**STUDENT IN-DISTRICT TRANSFER REQUEST**

For School Year \_\_\_\_\_

**Student's Name:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

Parent Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

Is this a new address?  YES  NO If yes, please indicate date of move: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**School Requested:** \_\_\_\_\_ **Home School:** \_\_\_\_\_

Grade level at time of transfer: \_\_\_\_\_ Does your child receive special services?  YES  NO

**Other Children in Family:**

Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

**Reason(s) for Requested Transfer (be specific):**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- A separate form must be completed for each student request.
- The ABC Building will require proof of residency when reviewing this form.
- **Open Enrollment students are not eligible for in-district transfers.**
- Insofar as you will be transferring outside your regular school boundary, **you will need to provide for your child's transportation to and from school.**
- Return this form to the Student Services Office, Westside Community Schools, 909 South 76<sup>th</sup> Street, Omaha NE 68114 or FAX to 402-390-2136.
- **A signed copy of this form will be returned to you as soon as possible.**

Below is the response to your request for your child to attend a school other than his/her District 66 home school. If your circumstances have changed or this information does not correctly reflect your child's status at this time, please contact the Student Services Office as soon as possible at 402-390-2142.

**TRANSFER REQUEST GRANTED:**  
 Your request to have your child attend \_\_\_\_\_ School has been **granted**, effective \_\_\_\_\_.

**TRANSFER REQUEST DENIED:**  
 We are sorry to inform you that your request to transfer your child to a different school has been **denied**.  
 Reason(s) \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Coordinator of Student Services

\_\_\_\_\_  
 Date