

**Fairfield City School District
Intradistrict Open Enrollment
Transfer Request 2011-2012**

The transfer of a student in the Fairfield School District out of his/her assigned attendance area shall be in accordance with the district's intradistrict open enrollment policy and regulations. The intradistrict open enrollment regulations are attached for your information. Please complete the following form and **return it to the attention of the principal of the building you desire your child(ren) to attend.** A decision will be reached on this application prior to the end of the current school year.

1. Parent/Guardian _____ Date ____ / ____ / ____
 Address _____ Zip Code _____
 Telephone _____
 2. Child's Name for whom transfer is being requested _____
 3. Brothers or sisters for whom transfer is requested on **separate** form:

 4. Your child presently **resides** in **Central East North South West** elementary area.
 (circle one)
 5. Grade of child for **2011-2012** school year _____
 6. Which elementary do you **wish** your child **to attend**? _____
 7. Please state your reasons for requesting that your child be transferred: _____

 8. If the request is made for purposes of childcare, please list name and address of daycare/sitter:

 9. Have you contacted the building principal where your child currently attends?
 YES _____ NO _____
 10. Have you had a conference with the principal and teacher concerning the reason for your child being transferred? YES _____ NO _____

 Date _____ Signature of Parent/Guardian _____

 Date and Time Received _____ Signature of Principal _____

 Signature, Coordinator of Programs _____
- _____ Accept Intradistrict Open Enrollment Transfer Request
- _____ Unable to accept Reason: _____

PLEASE SUBMIT TO THE ATTENTION OF THE PRINCIPAL OF THE BUILDING OF CHOICE

Applications may be submitted no earlier than April 15, 2011. Applications submitted after May 6, 2011, will be Priority VI.