## Inter-District Transfer Request OUT of LOSD

The parent/guardian of children between the ages of 5 and 18 years of age whose resident school district is the Lake Oswego School District (LOSD) must complete an *Inter-District Transfer Request Form* if they are requesting that a child enroll in a district other than LOSD. Both LOSD and the requested Non-Resident District must approve the request. Transportation is the responsibility of the parent unless otherwise specified.

The completed application must be submitted by the parent/guardian to LOSD for review and approval by the Executive Director of Elementary or Secondary Programs. Every effort will be made to provide written notification to the parent/guardian within approximately 10 days of LOSD's decision.

If the request is <u>denied</u> by LOSD: The parent/guardian shall receive a copy of the written denial, including reason(s) why the request was denied as recorded on the *Inter-District Transfer Request Form*.

If the request is <u>approved</u> by LOSD: Upon approval by LOSD, a contract will be written and signed by the Director of Elementary or Secondary Programs and then emailed or mailed along with the *Inter-District Transfer Request Form* for review and approval or denial by the Non-Resident School District's Superintendent or designee.

The Non-Resident District's superintendent or designee will record the reasons for approval or denial, sign the Form and return it to LOSD's Executive Director of Elementary or Secondary Programs.

**NOTE:** Approval of admission by transfer or tuition does not imply that your student can participate in Oregon School Activities Association (OSAA) athletics or activities at the high school level. OSAA regulations apply and should be carefully considered. Parent/guardian is responsible for contacting OSAA.

2455 Country Club Road, PO Box 70, Lake Oswego, OR 97034 • 503-534-2000 • losdschools.org

## Inter-District Transfer Request OUT of LOSD School Year: \_\_\_\_\_

Student Information					
		Date of Birt			
Student Name (Last, First, Middle)			th Current Gra	de Current S	chool
Non-resident School District in which Attendance Requested					
Non-resident School in which Attendance Requested					
This information is to aid LOSD in supporting the student.					
Is the student currently serving an expulsion?			S NO	)	
Does the student have an IEP?		YE	S NO	)	
Does the student have a 504 Accommodation?		YE	S NO	)	
Is student currently identified as ELL (English Language Learner)?			S NO	)	
Is student currently identified as TAG (Talented and Gifted)?		YE	S NO	)	
Parent/Guardian Information					
Parent/Guardian Name (Last/First)					
Address		City		State	Zip
Home Phone	Cell Phone	Email			
		1			
Parent/Guardian Signature			Date		
Application Form Submission Options					
Mail to: LOSD Attn: Transfer Request at PO Box 70, Lake Oswego, OR 97034 Email: foughts@loswego.k12.or.us					
Drop off: at District Administration Building 2455 Country Club Rd., Lake Oswego, OR 97034					
Lake Oswego School District Use Only					
Date Received:	Received by:				
Comments:		Approv	ed	Denied	
Executive Director Signature:			Date:		
	Non-Resident Schoo	ol District U	lse Only		
Date Received:	Received by:				
Comments:		Approv	ed	Denied	
Executive Director Signature:			Date:		