

**COVINGTON INDEPENDENT SCHOOL DISTRICT  
Student Transfer Application**

Please list all students in your household who are applying for transfer to Covington Independent School District.

Student Information								
Last	First	MI	Student SSN	DOB	Ethnicity	Sex	Grade in 2019-20	School district where they would attend if not a transfer
				/ /				
				/ /				
				/ /				
				/ /				
				/ /				
				/ /				

**Parent Information**

Parent's / Guardian's Printed Name \_\_\_\_\_

Parent's / Guardian's email address \_\_\_\_\_

Physical Street Address \_\_\_\_\_

Mailing Address if different than physical \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Reason for Transfer Request (Be specific): \_\_\_\_\_

Requested enrollment date: \_\_\_\_\_

Name of last school district attended: \_\_\_\_\_

Check any that apply: The student has engaged in conduct or misbehavior within the preceding school year that has resulted in:

- Currently enrolled in another district
- Excessive absences (Must be present at least 90% of the instructional day)
- Removal to an alternative education program
- Expulsion
- Has engaged in delinquent conduct or conduct in need of supervision and is on probation or other conditional release for that conduct.
- Has been convicted of a criminal offense and is on probation.

I have read and understand the transfer guidelines included in the cover letter to this application. I understand that presenting false or inaccurate information on this application is an offense against state law, which carries specific penalties.

Parent's / Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's / Guardian's phone number \_\_\_\_\_

**(Please be sure to sign the back side of this page before you return.)**

<p><b><i>This section to be completed by the receiving district's superintendent:</i></b></p> <p>Transfer Request: Approved: [ ] Disapproved: [ ]</p> <p>Superintendent's Signature _____ Date: _____</p>	<p>Principal: Yes [ ] No [ ]</p> <p>Principal's Initials: _____</p>
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# COVINGTON ISD TRANSFER AGREEMENT

This Transfer Agreement establishes the terms and conditions for your student(s) to attend the Covington ISD public schools as a transfer student(s) for the 2019-2020 school year. Your student(s) is/are currently a resident of \_\_\_\_\_ ISD. By signing this agreement, you are requesting that your student(s) be permitted to attend school in Covington ISD during the 2019-2020 school year and agree to the following terms and conditions for this transfer:

1. This transfer is effective for the current school year only. District approval of this transfer creates no right or expectation that the student will be admitted as a transfer for any subsequent school year.
2. This transfer is approved for the named student(s) only. District approval of this transfer creates no right or expectation that another student from the same family will be admitted as a transfer.
3. Student must maintain acceptable levels of attendance, academic achievement, and compliance with the Student Code of Conduct throughout the entire school year. Acceptable levels are defined as:
  - a. attendance that does not place the student at risk of losing credit under Education Code 25.092 or require the district to warn the parent or the student of truancy proceedings under Education Code 25.095;
  - b. academic achievement that results in a passing grade in all courses by the end of the semester. At the end of each grading period, the student should receive no more than one grade that is below passing; and
  - c. compliance with the Student Code of Conduct that results in no offenses requiring removal to an Alternative Education Program or expulsion and no more than two referrals each grading period for other Code of Conduct infractions.
4. The superintendent may revoke the transfer of a student who fails to maintain an acceptable level of attendance, academic achievement, or compliance with the Student Code of Conduct during a semester.
5. If this agreement is revoked, revocation ordinarily will be effective at the end of a semester; however, if the student's attendance, academic achievement, or compliance with the Student Code of Conduct falls below the acceptable standard during a semester, the Superintendent has discretion to revoke the transfer at the end of the grading period in which the standard is violated. The procedure for revocation is explained in Policy FDA (LOCAL), located on the district's website at [www.covingtonisd.org](http://www.covingtonisd.org). At the top of the page, select "About CISD", then "School Board", then "Board Policy", and enter the policy code FDA.
6. The parent or the student will be responsible for transportation to and from the district school to which the student is assigned.
7. Except as modified by this Transfer Agreement, the student will be subject to all policies, regulations, rights, privileges, and responsibilities of enrollment in the district as if he or she resided in the district.

The district and the parent agree that this Transfer Agreement is the entire agreement controlling the admission and enrollment of the student(s) in the district for the 2019-2020 school year.

\_\_\_\_\_  
Student(s) Printed Name(s)

\_\_\_\_\_  
Parent's/Guardian's Printed Name      Signature      Date

\_\_\_\_\_  
Administrator's Printed Name      Signature      Date

**(Please be sure to complete and sign the back side of this page before you return.)**