

**New Student
Open Enrollment Inter-District Transfer Application
To the Walnut Township Local Schools**

Return to: Superintendent
Walnut Township Local Schools
11850 Lancaster Street
Millersport, OH 43046

Application Deadline:
July 10, 2023

Early Application Encouraged

Student Name _____ Birthdate _____

Parent(s) Names _____ Phone (____) _____

Home Address _____ (Street)
_____ (P.O. Box)
_____ (City, Zip)

Is student currently in a Special Education Program? ____ yes ____ no

If yes, what program _____

Current IEP attached? ____ yes ____ no

of days absent (2022-2023 school year) _____

I (we) hereby request that the student listed above be considered for transfer to the Walnut Township Local School District for the **2023-2024** school year in the _____ grade. This student is currently enrolled in school at _____ (School District & Building Name) in grade _____.

(parent/guardian signature) (date)

NOTE: Inter-district transfer students must attach a **complete individual immunization record, a recent official transcript or record of achievement (including attendance), a current IEP (if handicapped), a record of any suspensions or expulsions from the previous school term, an original birth certificate and proof of residence.** Without these attached, the application will **not** be considered.
FALSIFICATION OF INFORMATION WILL RESULT IN THE REJECTION OR TERMINATION OF THE TRANSFER REQUEST.

(For Official Use Only)

Date Received in Complete Form: _____

Action Taken: ____ Approved ____ Disapproved

Superintendent's Signature: _____

Date Adjacent Superintendent Notified: _____

Date Parent/Guardian Acceptance Letter Sent: _____ Date Letter Returned: _____

Date Parent/Guardian Rejection Letter Sent: _____