Revised: 9/9/13

Intra-District OPEN ENROLLMENT REQUEST (WITHIN DISTRICT TRANSFER)

Weld County School District Re-3(J)

Parent/Guardian Information:	
Name:	Telephone:
Address:	
Student Information:	
Name:	Grade Level:
School Year Requested: 20 20	<u></u>
	School Requested:
Reason for Request:	
☐ Enrollment is contingent upon the parer attending Hudson Academy of Arts & Sci residence depending on Transportation roo ☐ Enrollment is for one academic year on enrollment for the following year must be ☐ Approval of this transfer may be revoked.	ly (or the remainder of the current year); request for open made by (August 1) ed at any time class size becomes unmanageable or parents
and/or student become uncooperative with	
☐ Approval of this request is for the above	attendance and behavior regulations of the approved school
The student is expected to ablue by all a	includance and behavior regulations of the approved school
District Administration Office (P.O. Box	please return it to the main office of any Re-3(J) school or the 269 – 99 W. Broadway, Keenesburg, CO 80643).
	□ Approve □ Deny
Signature of Principal of Resident School	Date
Signature of Principal of Requested School	
	□ Approve □ Deny
Signature of Superintendent Date	-
School Board: □Approve □ Deny Date:	