

Salado Independent School District  
601 N. Main  
P. O. Box 98  
Salado, TX 76571  
254-947-6901

**APPLICATION FOR PUPIL TRANSFER**

School Year

**2024-2025**

A nonresident student wishing to transfer into the District shall file an application for transfer each school year with the Superintendent. Transfers shall be granted for one regular school year at a time.

Please submit student's attendance records, discipline records, and academic records, including, but not limited to, course grades and state-mandated test scores.

**Student Information:**

Student's Name \_\_\_\_\_  
First MI Last

Gender: M \_\_\_ F \_\_\_ Student's Date of Birth: \_\_\_/\_\_\_/\_\_\_ Grade Level for 2024-2025 \_\_\_\_\_

Student's  
Physical Address \_\_\_\_\_

City State Zip Home Phone

The student is currently enrolled in: \_\_\_ public school \_\_\_ private school  
\_\_\_ parochial or home school \_\_\_ charter or academy school

Has the student engaged in conduct or misbehavior within the preceding year that has resulted in removal to a discipline alternative education program (DAEP), a disciplinary assignment outside the regular classroom or expulsion from any school district, charter school, private or parochial school, or academy? \_\_\_ Yes \_\_\_ No

If yes, please specify school and disciplinary placement, reason for removal and duration of removal.

Is the student on probation, conditional release, or informal adjudication from a juvenile court for engaging in delinquent conduct or conduct in need of supervision? \_\_\_ Yes \_\_\_ No

Is the student on probation or other conditional release for conviction of a criminal offense? \_\_\_ Yes \_\_\_ No

If yes, what reason was given? \_\_\_\_\_

Do you have other students applying for transfer into Salado ISD? \_\_\_ Yes \_\_\_ No

If yes, please list students' names and grade levels for the **2024-2025** school year:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Re: \_\_\_\_\_  
Student's name

**Parent or Guardian Information:**

\_\_\_\_\_  
Name of Father/Guardian

\_\_\_\_\_  
Name of Mother/Guardian

\_\_\_\_\_  
Father/Guardian address

\_\_\_\_\_  
Mother/Guardian address

\_\_\_\_\_  
Home/Cell Phone

\_\_\_\_\_  
Home/Cell Phone

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Email Address

With whom does student live? ☐ Both Parents ☐ Father ☐ Mother ☐ Guardian

If other, give name \_\_\_\_\_

Relationship \_\_\_\_\_

**Please indicate which of the following criteria makes you eligible for transfer consideration.  
Mark all that apply.**

- ☐ Student is currently a transfer student at SISD
- ☐ Student is a sibling of another SISD student
- ☐ Student is a child of an SISD employee
- ☐ Student is a dependent of an active duty military service member\*
- ☐ Student is a dependent of a disabled military veteran\*
- ☐ Student was a resident of SISD and became a non-resident during the course of the school year
- ☐ Student is a dependent of someone currently building a residence within the Salado ISD school boundaries. Documentation from the homebuilder with an estimated completion date is required. Construction must be completed during the school year in which the transfer is requested.

**Affirmation:** I understand that making a false statement in this document or any other document for the purpose of school enrollment is a criminal offense under Section 37.10 of the Texas Penal Code and could subject me to imprisonment for up to two years and/or a fine up to \$10,000. I further understand that enrollment of a child under false documents is a violation of Section 25.001 of the Texas Education Code and subjects me to liability under Texas law for the greater of these amounts: the maximum tuition permitted by law or the cost per student budgeted by the District for maintenance and operating expenses.

\_\_\_\_\_  
Parent or Legal Guardian

\_\_\_\_\_  
Date

\*If applicable, a copy of current military orders or a letter from the Department of Veteran's Affairs for disabled military veterans must accompany this application

SALADO INDEPENDENT SCHOOL DISTRICT  
NON-RESIDENT TRANSFER AGREEMENT

This is an agreement concerning the transfer of \_\_\_\_\_ (student), a non-resident, into the Salado Independent School District (SISD or "the District"). The agreement is entered into by \_\_\_\_\_, **Parent or Legal Guardian**, on behalf of the student, and the **Superintendent**, on behalf of the District. The agreement is effective only after being signed by the parent, and the Superintendent of the District. This Agreement is to be reviewed and signed annually.

**SISD Transfer Application Procedures**

1. Complete the Transfer Agreement and Application for Transfer and return to the Superintendent's Office. Please submit student's attendance records, discipline records, and academic records, including, but not limited to, course grades and state-mandated test scores.
2. The Principal may approve, deny, or revoke and will forward the application and agreement to the Superintendent's Office.
3. Parents will be notified of approval.

**Criteria:**

Approval is based upon space available, prior attendance, discipline records, and the student's academic records, including, but not limited to course grades and state-mandated test scores. The parent for out of district transfers must provide transportation. Students receiving Special Education services are required to have a planning meeting prior to transfer. Please reference LOCAL POLICY FDA for further questions.

**Recitals:**

- 1.1 Non-resident status. Neither Parent nor Student is a resident of SISD. Student desires to enroll in SISD.
- 1.2 Application only. The Parent's signature below constitutes an application for transfer of the Student. No transfer is effective until the Superintendent's signature appears on this document.
- 1.3 Transfer criteria. Transfer applications are considered on an individual basis without regard to sex, race, national origin, color, religion, disability, or ancestral language. In making decisions, the Principal and/or Superintendent may consider student's attendance, academic records, including, but not limited to course grades and state-mandated test scores, disciplinary history, as well as the district's class sizes, available resources, and any potential effect on resident students.
- 1.4 UIL. Parent acknowledges that the constitution or rules of the University Interscholastic League (UIL) may require the District to exclude the Student from participating in certain extracurricular interscholastic competitions.
- 1.5 GT program. Parent acknowledges that SISD policy EHBB (Local) makes placement of a transfer student in the District's gifted and talented program contingent upon reassessment using SISD documents.
- 1.6 Consent to release of records. The Parent's signature below constitutes a consent by the parent for SISD officials to obtain and review, for the purpose of the application for transfer, copies of the Student's records maintained by any school district in which the Student has been enrolled, including the district in which the student is currently enrolled, if any.

**Mutual Promises:**

- 2.1 No property interest. Parent and Student acknowledge that because the student is not a resident of SISD, any right of the student to become or remain enrolled or to receive any educational services is based on this agreement and not on residence, state eligibility criteria, or entitlement provided by law. This agreement does not create any property interest in favor of the student to become or remain enrolled in the SISD.
- 2.2 Parent's right to cancel. The parent may cancel this agreement by giving 30 days written notice to the Superintendent or by becoming a resident of SISD.
- 2.3 Revocation. The District may immediately revoke this agreement for any lawful reason and provide reasonable notification to Parent. Lawful reasons include, without limitation, notification by an agency of the state or federal government that the transfer contemplated by this agreement is not authorized by law, or any disciplinary infraction or condition for which this agreement permits revocation.
- 2.4 Rights and duties. Except as provided by this agreement, the non-resident Parent and Student possess all rights and agree to perform all duties provided by law and policy for resident parents and students.
- 2.5 Student behavior. Students who transfer into the District must follow all rules and regulations of the District, including those for student conduct and attendance. Failure to fulfill these responsibilities may result in revocation of the transfer agreement. Students and parents shall receive notice of this policy upon application for a transfer. At the Superintendent's discretion, in consultation with the campus Principal, any conduct by the Student that could result in a discretionary DAEP removal may also result in revocation of this agreement.
- 2.6 Additional conditions. This section does not limit the provisions in this agreement concerning disciplinary infractions. Because an inter-district transfer is a privilege rather than a right, the agreement may be revoked for any of the following reasons, without limitation:

- a. The student's attendance has fallen below ninety five percent in any semester.
- b. The student has earned repeated failing grades in any class.
- c. The student has engaged in repeated minor violations of the Student Code of Conduct.
- d. The student has engaged in any gang-related activity.
- e. The student has engaged repeatedly in behavior that hinders the learning of other students.
- f. The student has engaged in conduct that is disruptive to the educational process of the District.
- g. The student's vaccination record becomes out of compliance with state law.
- h. A District administrator determines that a false statement has been made in any part of this application.
- i. The student has withdrawn from SISD for any period of time or has enrolled in another public or private school.

Upon the occurrence of any of the listed circumstances, the Superintendent shall, before making a decision, receive the recommendation of the campus Principal concerning the status of the transfer. If the transfer is revoked, the District will notify the Parent and the Student's school district of residence.

If Parent or Student disagrees with the decision of the Superintendent, an appeal before the Board may be requested in writing and delivered to the Superintendent, who will schedule a hearing at a regular meeting of the Board. Except in cases in which the Principal has ordered expulsion or any discipline-related removal of the Student, the Student will be allowed to remain as a District student until the Board has rendered its decision.

2.7 Re-enrollment. The parent agrees that, in the event of revocation, the student will be immediately enrolled in the district of residence, another public or private school, or home school that meets the compulsory attendance law.

2.8 Duration of the agreement. Unless canceled or revoked by its terms, the agreement applies for the current academic school year.

Re: \_\_\_\_\_  
**Student's name**

I have read the Salado ISD policies for student transfers and agree to abide by said policies in order to transfer my child/children to Salado ISD..

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Signature of Superintendent

\_\_\_\_\_  
Date

**Please attach the following supporting documentation and return with application to the Superintendent's office, attention Jennifer Umpleby or scan and email to [jennifer.umpleby@saladoisd.org](mailto:jennifer.umpleby@saladoisd.org).**

- current transcript showing course grades
- state-mandated test scores
- attendance and/or current report card showing attendance summary
- discipline records from former school (if none, please submit statement from school that there were no discipline issues)

**-----FOR DISTRICT USE ONLY-----**

**To be completed by Campus Principal**

☐ **Approved**

☐ **Approved / Probationary with conditions** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

☐ **Denied**      **Reason:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

☐ **Revoked**      **Reason:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Campus Principal

Date \_\_\_\_\_

**Please check one:**

☐ Parent contacted by: \_\_\_\_\_ Date \_\_\_\_\_

☐ Please contact parent/guardian