

Louisiana Scholarship Student Transfer Form

Families seeking to transfer a Scholarship award from one Scholarship school to a different Scholarship school for the 2016- 2017 school year should complete this form together with the school they would like their child to attend. In order to request a transfer, students must:

- Have an award issued by the Louisiana Department of Education (LDOE) for the 2016-17 school year
- Be registered at a Scholarship school (if after May 20, 2016)
- Not be assigned to a public school in New Orleans

Scholarship students who wish to transfer from one participating Scholarship school to another during the school year are required to submit a transfer request form signed by both the parent/guardian and a representative of the receiving school. Transfers are only allowed to schools that meet accountability standards and who have Department approved available Scholarship seats.

The receiving school should submit this form to the LDOE by emailing the completed form to **studentscholarships@la.gov**. You will receive a response within 2-5 business days. **Submission of this form does not guarantee transfer approval.**

Student Name:	Student DOB:		Grade for 2016-17 school year:	
Parent/Guardian Name:	Parent/Guardian Phone:		Parent/Guardian Email Address:	
Current School Placement: Requ		Requested Transfer	equested Transfer School Name and Site Code:	
Briefly describe reason for transfer request:				
			Is this student transferring as a result of the floods that impacted Louisiana in August of 2016? Yes No	
Parent Signature:				
I understand that transfers are not guaranteed but will be considered on a case-by-case basis. I understand that if the transfer is approved my child loses his/her seat at his/her current Scholarship school. The information I have provided above is accurate and I will supply additional documentation as requested.				
Parent/Guardian Signature: Date:				
Receiving School Representative Signature:				
I understand that transfers are not guaranteed, and acknowledge that I have a seat and will enroll this student in the grade listed above.				
School Representative Name:		Date:		
School Representative Signature:				