

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 for the 2016-2017 school year (if prior to May 20, 2016)
- Be registered at a Scholarship school (if after May 20, 2016)
- Not be assigned to a public school in New Orleans – if families complete a Round 2 OneApp application and are awarded to a public school, they will automatically lose their Scholarship

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 to the Department 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 Louisiana Department of Education by emailing the completed form to [studentscholarships@la.gov](mailto:studentscholarships@la.gov). You will receive a response within 2-5 business days.

**Submission of this form is not a guarantee that a transfer will be approved.**

Student Name:	Student DOB:	Grade for 2016-2017 School Year:
Parent/Guardian Name:	Parent/Guardian Phone:	Parent/Guardian Email:

Current School Placement:
Requested Transfer School Name and Site Code:
Briefly describe reason for transfer request:

**Parent Signature:**

*I understand that transfers are not guaranteed but will be considered on a case-by-case basis. This transfer does not go into effect prior to the first day of the 2016-17 school year. 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:**

*I understand that transfers are not guaranteed but will be considered on a case-by-case basis. I acknowledge that I have a seat for this student in the grade level listed above and will enroll him/her.*

School Representative Name: \_\_\_\_\_

School Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_