



Student Transfer Application  
PreK-12 Out of District  
Information for Applications

WISD has the authority to limit the number of transfer students permitted to attend District schools. A request for transfer must be filed with the Superintendent’s office. The Superintendent or designee is authorized to accept or reject any transfer requests, provided that such action is without regard to race, religion, color, sex, disability, national origin, or ancestral language. Current transfer placement shall not guarantee future transfer approvals. A person seeking a renewal of a transfer agreement shall reapply by June 1 of each year for the following school year.

\*\*Instructions: Please read the application thoroughly before applying. Print, complete and sign the form. Email [transfer@wimberleyisd.net](mailto:transfer@wimberleyisd.net) or submit to the superintendent’s office at 951 FM 2325 Wimberley, Texas 78676

**School Year: 2024-2025**

**Reason for Request: Check all that apply**

- In District Previous Year (No Documents to Attach)
- Open Enrollment
- Wimberley ISD Employee (Which Campus): \_\_\_\_\_
- Moving out of WISD, wish to remain in District: Date of Move: \_\_\_\_\_
- Building/Buying/Leasing Residence in WISD: Date of Move: \_\_\_\_\_

**Sending District Name/Number (See Page 4):** \_\_\_\_\_

\_\_\_\_\_  
**Student Name: Last, First, MI** **Date of Birth**

\_\_\_\_\_  
**Grade Level** **Receiving Campus(pg4)** **In WISD last year? Yes/No**

**Special Services Required/Assessed:**

- None
- ESL/Emergent Bilingual
- 504 (Attach current 504 Plan)
- Speech (Attach current FIE & IEP)
- GT
- Special Education and/or Dyslexia (Attach current FIE & IEP)

**Required Documents for Application:**

**\*\*New Transfers: These files must be received by WISD for your application to be processed.\*\***

- Most recent report card(Grades PK-12)(PreK documentation if student is transferring into Kindergarten)
- Test Scores (STAAR, Assessment)
- Documentation of attendance and discipline records (PK-12)
- Transcripts (Grades 8-12)
- Any Special Services Documentation/Records (FIE, IEP, FBA, 504)



**Parent Information and Signature Sheet**

\_\_\_\_\_  
**Parent/Guardian Name**

\_\_\_\_\_  
**Parent/Guardian Email**

\_\_\_\_\_  
**Home Phone**

\_\_\_\_\_  
**Cell Phone**

\_\_\_\_\_  
**Residence Address**

**Sibling Information** *(Each Student must complete a full transfer application.)*

Name of Sibling \_\_\_\_\_  
Last name, First Name \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Name of Sibling \_\_\_\_\_  
Last name, First Name \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Name of Sibling \_\_\_\_\_  
Last name, First Name \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Name of Sibling \_\_\_\_\_  
Last name, First Name \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

I understand that, if approved, the transfer is granted conditionally based on the following criteria: program availability, grade level spaces, discipline history, academic performance, and attendance, including tardies. The transfer may be revoked based on Board Policy, to the extent permitted by law. **I understand that transportation to the requested campus is my responsibility.** I understand that falsification of information is a Class A Misdemeanor and can lead to legal action. I have read and understand the District policy on out of district transfers. I agree to abide by all rules and regulations set forth in this policy. I understand that as a transfer student, school placement may be changed to accommodate resident students. I have been informed that, in some cases, previously approved transfers may be revoked during the school year due to any of the above-mentioned criteria.

- ★ I have read the WISD FDA(LOCAL) Policy and FDA(LEGAL) Policy regarding transfer students
- ★ I have read the [District of Innovation](#) regarding transfer students

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

\_\_\_\_\_  
**Date**



## Student Transfer Agreement

This Agreement entered into between Wimberley ISD, hereinafter referred to as "District" and

\_\_\_\_\_.

**Parent/Guardian Name**

Parents/Legal Guardians of transfer student hereinafter referred to as "Parents" is entered into on behalf of the following student, hereinafter referred to as "Students":

Attach last report card & STAAR ASSESSMENT

**NEW TRANSFERS: Files must be attached, emailed or mailed before your application will be processed.**

Files on record; returning student

As part of this agreement, the District agrees to enroll all educational services and any necessary support resident student exclusive of transportation services to and from the students home or domicile if outside the district boundaries. District has the right to revoke student transfers at any point during the school year if attendance, behavior (either parent or student), or issues requiring additional special services.

**As part of this agreement parents acknowledge and agree to the following: District is allowing said transfer of students in accordance with Board Policy FDA and the District of Innovation as specified by the Board of Trustees of the District. Parents acknowledge that the District has no obligations to the student other than that specified above. The district has the option to terminate the transfer agreement for students in K-12 when the student/ parent has not been forthcoming with information regarding discipline, special programs or other issues that end up costing the district to keep the student enrolled. At any time during the school year, a transfer student who becomes a discipline issue, has attendance short of district goal (below 95%), or is in need of special services which exceeds state funding for that student, WISD may terminate their transfer agreement. Parents are to provide transportation to and from the campus of enrollment. Parents also acknowledge that unacceptable behavior on the part of the student or parents will be ground for termination of this agreement.**

Tuition for the **current** school year is **\$0.00** unless enrolling in the Tuition Based PreK Program at Blue Hole Primary.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_



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

**Wimberley ISD Office Use Only**

Date Received at WISD Administration Office: \_\_\_\_\_

Date Sent to Receiving Principal for Review: \_\_\_\_\_

Receiving Principal: \_\_\_\_\_

Approved: \_\_\_\_\_

Denied: \_

Date: \_\_\_\_

Reason for Denial: Attendance

Space/Staff

Discipline

Date Parent/Guardian Notified: \_\_\_\_

Method of Notification: Emailed

Letter

Phone

Code/Information for answering questions on page 1.

**Sending School County District Number**

Austin ISD (227-901)

Blanco ISD (016-902)

Comal ISD (046-902)

Dripping Springs ISD (105-904)

Hays CISD (105-906)

Johnson City (101-691) Lake Travis ISD (227-913) Leander ISD (227-901)

Lockhart ISD (028-902)

New Braunfels ISD (046-901) San Marcos CISD (105-902)

**Receiving Campus**

K-2nd Blue Hole Primary

3rd - 5th Jacob's Well Elementary

6th - 8th Danforth Junior High School

9th-12th - Wimberley High School