



# West Linn-Wilsonville School District

Administration Building

22210 SW Stafford Road, Tualatin, Oregon 97062

Telephone: 503-673-7000 · Fax: 503-673-7001

## 2019-2020 Non-Resident Inter-District Transfer Application

From Resident School District: \_\_\_\_\_ Date: \_\_\_\_\_

Student's **FULL** Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student's Address: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ Is the student currently expelled? Yes  No

(Please write neatly)

Is the student currently attending a WLWV School? Yes  School: \_\_\_\_\_ No

Has the student previously applied to remain in the WLWV district due to a mid-year/summer move? Yes  No

Name and grade of sibling currently enrolled in the district: \_\_\_\_\_

*\*Out of district primary students will attend the middle school based on the School Board's adopted Transition Plan and transfer requests to Trillium Creek PS, Lowrie PS or Rosemont Ridge MS are not available.*

Out of district students already attending **Boeckman Creek, Boones Ferry or Stafford Primary Schools** may attend:  
**Inza R. Wood or Meridian Creek Middle Schools**

Out of district students already attending **Bolton, Cedaroak Park, Sunset or Willamette Primary Schools** may attend:  
**Athey Creek, Inza R. Wood or Meridian Creek Middle Schools**

**\*Parent/Guardian initials in acknowledgment of middle school:** \_\_\_\_\_

Requested **\*PRIMARY** School: \_\_\_\_\_ 2019-2020 Grade \_\_\_\_\_

Requested **\*MIDDLE** School: \_\_\_\_\_ 2019-2020 Grade \_\_\_\_\_

Requested **HIGH** School: \_\_\_\_\_ 2019-2020 Grade \_\_\_\_\_

**NOTES:** Attendance and behavior play an integral role in the success of your child and is a consideration in this legal contractual agreement • Acceptance of a non-resident student admission under ORS 339.133(5)(b) does not guarantee athletic eligibility at the high school level as OSAA rules apply and should be carefully considered • Transportation to the West Linn-Wilsonville School District is the responsibility of the transferring student/family.

I hereby certify the information I have provided is true and I understand that falsely responding to any of the questions herein will result in denial and/or revocation of this request. I acknowledge that the resident and non-resident districts will exchange student educational records and other educationally relevant information.

Parent or Guardian: \_\_\_\_\_  
Print Name Signature

**HOW TO APPLY: Request a release from your residential school district and submit this application to:**

Kelly Douglas [Douglask@wlwv.k12.or.us](mailto:Douglask@wlwv.k12.or.us)

**Mail:** West Linn-Wilsonville School District  
22210 SW Stafford Rd., Tualatin, Oregon 97062