



Henrietta Independent School District

“Commitment to Excellence”

Kendra Bennett, Acting Superintendent

HENRIETTA ISD TRANSFER AGREEMENT

In accordance to School Board Policy FDA (Local) in approving transfers, the Board shall consider availability of space and instructional staff and the student’s disciplinary history and attendance records. In addition to these factors the local campus administrators will also consider the student’s academic history.

As a transfer student your child must follow all rules and regulations of the District, including those for student conduct and attendance. Violations of the District’s rules and regulations may result in revocation of the transfer agreement.

I have read the above transfer agreement and understand what my child must do to become a transfer student as well as what he/she must do to maintain his/her transfer status. I further understand that once my child violates the above mentioned standards his/her status as a transfer student may be revoked and the sending school notified that he/she will be coming back to the school district of residence.

Student Name

Date

Parent/Guardian Name

Parent/Guardian Signature

Approved by the Henrietta Independent School District Board of Trustees April 9, 2009

HENRIETTA ISD

2023-2024 Application for Transfer

This section to be completed by campus:

Student's Name (Last, First, MI)	Date of Birth	Student's ID Number (SS#)	Student in District Last Year		Ethnic Code (see key below)	Sending Co. District Number	Exemption /Hardship Code	Student's 2023-2024 Grade Level	Receiving Campus Number	Campus Administrator's Verification and recommendation (campus administrator please sign)	Date Approved	Date Denied
			Yes	No								

Ethnic Code Key:

- (2) Asian or Pacific Islander
- (3) Black, not Hispanic
- (4) Hispanic
- (I) – Grade Level not offered in Home District
- (5) White, not Hispanic

Exemption/Hardship Codes:

- (B) – Senior who has been here 2 years
- (C) – No Child Care Facility in Home District
- (D) – Student's Safety is at Risk
- (E) – Parent is employed by Receiving District
- (G) – Transferring to a Regional Day School for Deaf
- (H) – Special Education Student
- (J) – Student does not qualify for other exemptions

This section must be completed by parent or guardian:

I have read and understand as well as signed the Henrietta Transfer Agreement available on the Henrietta website. I understand that a printed copy is available from the District Administration office at my request. I have been informed of the receiving district's policy concerning tuition charges, if any, for a transferred student whose grade is taught in the student's district of residence; and I accept responsibility for the payment of tuition.

Printed Name _____

Street Address _____

Mailing Address _____

City, State, Zip _____

Telephone No. _____

Signature _____

Date _____

Are you an employee of HISD? Yes _____ No _____

This section must be completed by the receiving district superintendent:

The above transfer(s) was approved / disapproved on this _____ day of _____ 20____.

Typed Name of Receiving District Acting Superintendent Kendra Bennett	Signature	Telephone 940-720-7900	Henrietta ISD 1801 E Crafton Henrietta, TX 76365
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