



Valley Mills Independent School District

One Eagle Way

PO Box 518

Valley Mills, Texas 76689

Phone: (254)932-5210 / Fax: (254)932-6601

Prospective Valley Mills ISD Students and Parents/Guardians:

Welcome to Valley Mills Independent School District. Valley Mills ISD is a district consisting of hard working students and a staff who takes pride in the educational achievement of each and every student. We welcome the opportunity for you to be a part of our positive and incredibly successful environment. In addition to completing this agreement form, all potential transfer students should complete the Valley Mills ISD application for student transfer.

Valley Mills ISD does not provide transportation for out of district transfer students.

Listed below are possible reasons for denial or revocation of transfer to Valley Mills ISD:

- Overcrowded conditions at receiving campus that would require hiring of additional staff
- Program availability
- Excessive tardiness or absences that lead to truancy issues
- Discipline or safety issues
- Failing of one or more core subjects
- Failure to meet appropriate deadlines
- Failure to abide Student Handbook and/or Student Code of Conduct policies and procedures
- Serious or persistent misconduct, expulsion, or any offense mandating a DAEP or JJAEP placement
- Any falsification of information

Student Name: _____ Admission Grade-Level: _____

Physical Address: _____ City: _____

Parent/Guardian Name: _____ Phone #: _____

I understand that, if approved, the transfer is granted conditionally based on the above criteria of possible reasons to deny or revoke. I also understand that VMISD may repeal an out of district transfer if the student fails to abide by policy in regard to program availability, discipline history, academic performance, and attendance (including tardies).

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

The mission of Valley Mills ISD is to educate each student to the highest levels of Academic achievement and enable students to become successful in a global society.



Authority for Data Collection: Texas Education Code 21.061; Civil Action 5281, Section A

Planned Use of Data: To complete the report required by federal Court Order Civil Action 5281

Instructions: This form must be used for all student transfers, **within the State of Texas**, including hardship. Page 1
Column instructions can be below. The Campus Administrator must circle **approved or disapproved** and sign the transfer form. For further information, contact the Division of Equal Education Opportunity at 512/463-9671.

Year Applying For 2020-2021	Reason for Request <input type="checkbox"/> Valley Mills ISD Employee: At which campus is parent employed? <input type="checkbox"/> Moving Out of VMISD, wish to remain in the district for the rest of current year Date of Move: <input type="checkbox"/> Building/Buying/Leasing residence in VMISD Est. Move in date: (Attach contract) <input type="checkbox"/> Other: _____
Exemption / Hardship Code	
Sending District/Campus	

Student Name: last, first mi	admission grade level	ethnic code (see pg 3)	District Last Year Yes No
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Physical Address	City
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Special Services Being Provided <input type="checkbox"/> None <input type="checkbox"/> ESL/Bilingual <input type="checkbox"/> Career TECH <input type="checkbox"/> 504 (att ach current 504 plan) <input type="checkbox"/> Speech <input type="checkbox"/> GT <input type="checkbox"/> Special Ed (att ach current IEP)	REQUIRED DOCUMENTS <u>NEW TRANSFERS: these files must be received by VMISD for your application to be processed.</u> <input type="checkbox"/> Most recent report card (Grades K-12) <input type="checkbox"/> Test Scores (TAKS, STARR, Assessment) (Grades 4-12) <input type="checkbox"/> Documentation of satisfactory attendance and discipline records (K-12) <input type="checkbox"/> Transcripts (Grades 9-12) <input type="checkbox"/> I have read the FDA Local and Legal Board Policy Documents
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Name of Parent or Guardian	Email Address	Home Phone
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Mailing Address	City	St	Zip	CellPhone
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I understand that, if approved, the transfer is granted conditionally based on the following criteria: program availability, discipline history, academic performance, and attendance, including tardies. The transfer may be revoked based on Board Policy, to extent permitted by law. It is effective for one school year. 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 due to space limitations. 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.

Tuition for the current school year is \$0.00.

Parent/Guardian Initial:

Signature of Parent or Guardian:



Valley Mills Independent School District Application for Student Transfer

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This agreement entered into between the Valley Mills Independent School District, herein after referred to as "District" and

(Parent/Guardian)

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

☐ Attach last report card & STAAR results

NEW TRANSFERS: these files must be attached, emailed or mailed for your application to be processed.

☐ Files on record; returning student

As part of this agreement 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.

As part of this agreement Parents hereby agree to the following: Pay tuition to the District in a timely manner and in an amount specified by the District's designated official. Provide transportation to and from the campus of enrollment if the students home or domicile is outside the district boundaries.

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 payment of tuition as specified by the Board of Trustees of the District. Parents acknowledge that the District has no obligations to the Students other than that specified above. Parents acknowledge that the enrollment into District is done at the will of the District and under that provisions that said enrollment will not place the District in a financial or other hardship. Parents also acknowledge that unacceptable behavior on the part of the Students or Parents will be grounds for termination of this agreement.

Tuition for the current school year is \$0.00.

Parents Signature: _____

Cell Phone Number: _____

Email Address: _____

VALLEY MILLS ISD OFFICE USE ONLY

Date Received at VMISD SUPERINTENDENT'S Office:

Date Sent to Receiving Principal for Review:

Receiving Principal:

Approved:

Denied:

Date:

Reason for Denial: Grades

Attendance

Space/Staff

Discipline

Program Discipline

Other

Date Parent/Guardian Notified:

Method of Notification:

Emailed

Letter

Phone



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Exemption / Hardship Code

- A. Student taking academic courses not offered in the district of residence.
- B. Graduating senior who has attended Valley Mills ISD for at least the two previous years.
- C. Student with two working parents, or whose sole parent works (in a single-parent home), and no child care facility is located in the sending district. Only children less than ten years of age will be considered as needing child care unless it can be demonstrated that a child suffers a handicap which renders him or her incapable of self-care.
- D. Student whose health or safety is involved. Documentation from a Medical Doctor delineating specific medical reasons must be obtained and on file.
- E. Student whose parent/guardian is employed by VMISD and currently contributes to the Texas Teacher Retirement System.
- F. Student whose home is more than 20 miles closer to VMISD than the school of residence.
- G. Student transferring to a regional day school for the deaf. (C.A. 5281)
- H. Special education student from district where the special education class for which the student is qualified is unavailable and such class is available in VMISD. Student has been properly screened according to Agency guidelines by VMISD. (C.A. 5281)
- I. Student residing in a district that does not offer the grade level of that student.
- J. Student does not qualify for any of the preceding exemptions/hardships.

Ethnic Code

- 1 American Indian or Native Alaskan
- 2 Asian or Pacific Islander
- 3 Black, not Hispanic
- 4 Hispanic
- 5 White, not Hispanic