**HIGH SCHOOL**

**PUBLIC EDUCATION GRANT (PEG)**

**2023-2024 IN-DISTRICT SCHOOL TRANSFER REQUEST**

**ACKNOWLEDGEMENT:** I have received/read the Public Education Grant (PEG) communication regarding Willowridge High School (WHS) and understand that I may request a transfer for my child to attend either Marshall High School, Kempner High School, or Crawford High School (**available to rising 9th and 10th graders only**) during the 2023-2024 school year.

This transfer request must be completed and returned to the Department of Student Affairs. You may send your completed transfer request application to Student.Affairs@fortbendisd.com. There must be an application on file for each student in which a transfer request is applicable.

I understand that it is my right to request a transfer to a school designated by the district that has not been identified as a PEG campus during 2023-2024. I understand that I will be responsible for my child’s transportation to and from the selected campus. I also understand that this transfer expires upon any of the following three conditions:

* *Completion of all grades offered by the campus upon which eligibility was originally based*
* *Removal of the campus from the PEG list*
* *Assignment of the student to a campus that is not on the PEG list as a result of redrawn attendance boundaries or student movement into a different attendance area*

Therefore, based on the above acknowledgement and by signing and submitting this form, I request a transfer for my child to attend:

 First Choice Second Choice Third Choice \_\_\_\_\_\_\_\_\_ (note: choices are limited to Marshall HS, Kempner HS, and Crawford HS) during the 2023-2024 school year. Crawford High School is only available to rising 9th and 10th grade students at this time. I understand that once this form has been approved, my child must enroll at the approved campus either by the first day of school or within 30 school days from the date of my child’s first day of attendance at Willowridge High School during the 2023-24 school year.

NAME OF STUDENT: ID# 2023/24 GRADE LEVEL: \_\_\_\_\_\_\_

NAME OF PARENT/GUARDIAN:

PARENT/GUARDIAN Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME STREET ADDRESS: CITY: \_\_\_\_\_\_\_\_\_\_ ZIP CODE:

HOME PHONE NUMBER: ( ) WORK/CELLULAR PHONE: ( )

PARENT/GUARDIAN SIGNATURE: DATE:

|  |
| --- |
| A District response to your request for a school transfer will be provided to you after receipt of this form in the office designated below. **Please** **Note:** Transportation to/from the requested school is the sole responsibility of the parent. **District transportation will not be provided**. |

**INSTRUCTIONS:** Please return this completed and signed form to the office or email listed below or to request a PEG transfer for the 2023-2024 school year.

Department of Student Affairs

Fort Bend Independent School District

16431 Lexington Boulevard – Suite 101

Sugar Land, Texas 77479

Tel.: 281-327-2829/Fax: 281-327-2830

Student.Affairs@fortbendisd.com

**ADMIN USE ONLY…Residence/Enrollment Verified: \_\_\_\_\_\_\_\_**

**APPROVAL ­­\_\_\_\_\_\_\_\_\_ DENIAL \_\_\_\_\_\_\_\_\_\_ If denied, list reason \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE DATE**