MAY INDEPENDENT SCHOOL DISTRICT
Application for Student Transfer
School year 2018 to 2019

Authority for Data Collection: Texas Education Code 21.061; Civil Action 5261, Section A

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

Student's Name	***Social Security #***	***Birth Date***	***Ethnicity***	***Current Grade***

Current school attending: _____
(previous school attended)
City: _____ **State:** _____ **Zip:** _____

Parent/Guardian Name: _____ **Signature:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone#: _____ **Work #:** _____ **Cell#:** _____

Student Mailing Address: _____
(if different)
City: _____ **State:** _____ **Zip:** _____

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(THIS SECTION FOR OFFICE PERSONNEL ONLY)

Circle one: Approved Disapproved

May ISD Principal: _____ _____ **Date:** _____
Print Name **Signature**

Circle one: Approved Disapproved

May ISD Superintendent: _____ **Date:** _____
Steve Howard