



GLENDALE UNIFIED SCHOOL DISTRICT
223 North Jackson St., Glendale, California 91206-4380
Telephone: 818-241-3111, Ext. 1283 • Fax: 818-547-0213

**OFFICE OF
STUDENT SUPPORT SERVICES**

SCHOOL TRANSFER FORM (2021-2022)

Name: _____ Student ID: _____ Date of Birth: _____

Transferring From: _____ Transferring To: _____

Reason for Transfer (permit/magnet/FLAG/change of address...): _____

Child Lives With: Parent/Guardian #1:

Parent/Guardian Name: _____

Address: _____

Primary Telephone Number: _____ Email Address: _____

Child Lives With: Parent/Guardian #2:

Parent/Guardian Name: _____

Address: _____

Primary Telephone Number: _____ Email Address: _____

If parents are not living together, please provide the following information on the parent not living with child:

Name: _____ Father Mother Other: _____

Address: _____

Telephone Number: _____ Email Address: _____

Does your child have a current Individualized Education Program (IEP)? YES NO

Is your child on a 504 Plan? YES NO

Are there any Legal Documents (Restraining Orders, Custody Order, Ward of Court, etc.) on file for this child? YES NO

Preferred Language for School-to-Home Communication: _____

Parent/Guardian Signature

Date



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Student Support Services
Hagop Eulmessekian, Director

Re: ELEMENTARY CAPPING LETTER (K-6)

Dear Parent or Legal Guardian:

The Glendale Unified School District (GUSD) welcomes you and your student(s) to Elementary School. According to District and school enrollment projections, our school is expected to be at capacity in Kindergarten through sixth grade for the 2021-2022 school year.

Schools may reach capacity at individual grade levels throughout the year -- this is referred to as, "capping." Per GUSD Board Policy 5115, when capping occurs at a grade level of a school and a new student attempts to enroll at that capped grade level, the new student will be placed in another GUSD school where space is available.

1. Students will be reassigned by Student Support Services to the nearest school having an opening. All reassigned students will be given priority to return to their neighborhood school the following year.
2. Student Support Services will offer students who have been reassigned the opportunity to return to their neighborhood school as space becomes available, though such students may be encouraged to complete their school year in their assigned school to maintain continuity of instruction. After May 1, reassigned students will not return to their neighborhood school until the beginning of the following school year.
3. The principal and Student Support Services shall maintain a waiting list in priority order for students desiring entry into the neighborhood school and notify parent or guardian when an opening occurs during the school year.
4. Capped students may request to remain at capped site.

Sincerely,

Your Elementary School Principal

Child's Name _____ Grade _____

I understand that enrollment procedures are complete for my child. I also understand that the school will notify me as soon as possible regarding my child's enrollment status for the current school year, since there is a possibility that my child will be unable to enroll at this school due to enrollment limits. My child will then be reassigned to the nearest school with an opening.

Signature of Parent/Legal Guardian

OFFICE USE ONLY:

Enrollment Date: _____ Enrollment Time: _____