



Gladstone School District 115
17789 Webster Road - Gladstone, Oregon 97027-1498
(503) 655-2777

**2017-2018 Request for Interdistrict
Transfer Out of Resident District**

Student's Legal Name _____

Student's Address _____

Student's Mailing Address _____

Date of Birth _____ Student Grade Level in 2017-2018 _____

Parent/Guardian Name (Person in Parental Relationship) _____

Primary Phone of Parent/Guardian _____ Secondary Phone _____

Parent/Guardian Email Address _____

OSAA Athletics/Activities: Approval of admission does not imply that your child can participate in OSAA athletics or activities at the high school level. OSAA regulations apply and should be carefully considered.

Transportation: No out of District transportation will be provided.

I hereby certify the information I have provided is true and I understand that falsely responding to any of the questions herein will result in denial and/or revocation of this application. I certify that I am the parent or guardian in legal custody of the student.

Signature of Parent/Guardian _____ Date _____

Granting this request does not guarantee acceptance to another district.

Final Action of Resident District: Approved Denied

Reason for denial: _____

Superintendent/Designee: _____ Date _____