



Eastwood Knolls International School

10000 Buckwood Drive El Paso, Texas 79925 (915) 434-4400

THE DISTRICT

February 1, 2019

Dear Parents,

Thank you for your interest in becoming a part of the Eastwood Knolls International Community! We are honored that you are requesting a transfer to Knolls and ask that you take the time to read the information provided and gather the requested documents for your transfer application.

- Transfer Requests are governed by YISD Regulation FDA-R.
- Availability of transfers varies by grade level and program placement.
- Transfer requests often outnumber the spaces available; grades, test scores, discipline record, and attendance record are all reviewed.
- Students residing in the attendance area must be enrolled before considering transfers. Unexpected increase in enrollment may result in transfer denial or revocation.
- Transfer requests are accepted throughout the spring of each school year. Applications received after April 19th will be placed on a *Summer Waiting List*. Applications for transfer do not carry over from one year to the next.

Please complete the forms attached and submit with a copy of the student's most recent report card, state/national testing results, attendance record, and discipline record in order for your transfer to be considered. At the conclusion of the current school year please update your application with a final report card and STAAR or other testing results.

DATES TO KEEP IN MIND:

- ✓ April 19, 2019 - Deadline to turn in applications and documentation
- ✓ May 31, 2019 - Acceptance/Denial Letters are mailed out
- ✓ June 3-7, 2019 – Parents of **approved applicants** will need to come on campus & sign Acceptance Letter



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Monolingual Program Interest Form Eastwood Knolls International School 2019-2020 School Year

Student's Name: _____ Grade level being requested: _____

DOB: _____ Student's Primary Language: _____

Student's Home School: _____

Last School Attended: _____

Parent/Guardian's Name: _____ Phone Number: _____

Place of Employment: _____ Phone Number: _____

Home Address: _____ Mailing Address: _____

City: _____ State: _____ Zip Code: _____ City: _____ State: _____ Zip Code: _____

For Office Use Only

In District Out of District

FDA-R Priority: _____

S/R: _____

Application received by: _____

Date: _____

Application Status

Approved Approved By: _____

Declined Summer Waiting List

Date Entered: _____

Required Documentation

Only If Applicable

Attendance Record

Current Report Card

Discipline Record

State/National Test Scores