



Reynolds School District  
 Administration Offices  
 1204 NE 201<sup>st</sup> Avenue  
 Fairview, OR 97024  
 503.661.7200 • FAX 503.667.6932

**Request for Nonresident Student Admission-Interdistrict Transfer with Consent of  
 Both Affected Districts • JECB-AR (4a)**

**Use this form if you live in the Reynolds School District and wish to apply to attend another district**

<b>Student State ID #</b>	<b>District ID#</b>	<b>Date of Birth</b>
<b>Student Legal Last Name</b>	<b>Student Legal First Name</b>	<b>Student Legal Middle Name</b>
Parent/Guardian Last Name	Parent/Guardian First Name	Parental relationship to student
<i>Results will be mailed to this address</i> Street ..... Apartment Complex..... Apartment # ..... City..... State..... Zip.....		Parent/Guardian Primary Phone  Parent/Guardian Secondary Phone  Email Contact

OSAA students will need to contact OSAA at 503.682.6722 for guidance on athletics and activity eligibility

<b>Grade Level in 2016-2017</b>	<b>Home School</b>	<b>Last School Attended</b>	<b>Last District Attended</b>
<b>Requesting School</b>	<b>Requesting District</b>		

**OPEN APRIL 2016 – SEPTEMBER 7, 2016**

**Is your student currently under expulsion?**       Yes       No

If yes, what was the reason? .....

..... ← .....

Parent/Guardian Signature Date

**Final Action of Reynolds School District**

_____ Authorizing signature	Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	_____ Date
Appeal	Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	_____

**Final Action of Nonresident District**

\_\_\_\_\_ Authorizing signature Date

Approved     Denied     Wait List     Lottery Number

