



Westside Community Schools
909 S. 76 St
Omaha, NE 68114
402-390-2100

STUDENT IN-DISTRICT TRANSFER REQUEST

Rev. 12/2025

For School Year _____

- Parents or guardians of resident students who wish for their children to attend an elementary school other than the one associated with their residential address must **submit an In-District Transfer (IDT) request form for each child applying**. Applications must be submitted during the school year *prior* to the year in which the requested transfer would take effect.
- **Transportation is not provided for students attending school under an IDT.** Parents/guardians are responsible for transporting their children to and from school, regardless of distance.
- **Students attending school under an IDT are not guaranteed a seat at their original school.** Should they later wish for their children to return to their original school, parents/guardians must submit a new IDT request form, which would be accepted or denied following the process and criteria described below.
- For earliest consideration, completed applications for the succeeding school year must be submitted to the Office of Student Services at the ABC Building **no later than 4 p.m. on March 15th**. Applicants will be notified whether their request was approved or denied no later than April 5th. **Once an IDT has been approved, students are not required to resubmit a new form each year.**
- Requests for IDTs received after March 15th will be acted upon no earlier than May 1st and only if unfilled seats remain, upon completion of the IDT and Option Enrollment placements in March. Transfers requested on or after the first day of the school year will not be considered until the following March.
- Non-Resident Students, including those enrolled under the Option Enrollment program, are not eligible for IDTs.
- Return completed form to Office of Student Services, Westside Community Schools, 909 S 76th St, Omaha NE 68114 or Fax to 402-390-2136.

Student's Name: _____ Birthdate: _____

Parent Name(s): _____

Phone: _____ Email: _____

Address: _____

Is this a new address? _____ If yes, please indicate date of move: _____

(NOTE: For new addresses, proof of residency must be submitted before this request will be considered.)

Home School: _____ Requested School: _____

Grade level at time of transfer: _____ Does your child receive special services? _____

Siblings: Do you have other children in your household for whom you are also requesting a transfer? _____

(NOTE: YOU MUST SUBMIT A SEPARATE FORM FOR EACH STUDENT FOR WHOM YOU WISH TO TRANSFER)

Reason(s) for Requested Transfer (Please be specific. Write on back of sheet if necessary):

Parent Signature: _____ Date: _____

☐ **TRANSFER REQUEST GRANTED**

Your request for your child attend _____ has been **granted**, effective _____.

☐ **TRANSFER REQUEST DENIED**

We are sorry to inform you that your request to transfer your child to a different school has been **denied**.

Reason(s) _____

Student Services Signature _____

Date _____