



Los Angeles Unified School District
 OFFICE OF SCHOOL DESIGN OPTIONS
 ZONES OF CHOICE OFFICE
ONE-TIME TRANSFER (OTT) REQUEST
2020-2021

EFFECTIVE FALL 2020
 APPLICATION PERIOD: 5/4/20 – 5/29/20

Transfer request from school to school within the same RESIDENTIAL Zone of Choice

All students are encouraged to remain in the same school in order to maintain consistency in their instructional program. **Students enrolled in a Zone of Choice school are allowed a One-Time Transfer (OTT) between schools within the same zone (Middle school: 6th, 7th grade and High school: 9th, 10th, and 11th. grade).** First-year students are not eligible for an OTT until they complete their first school year. All Requests will be reviewed and may be granted based on eligibility requirements (attendance, behavior and grades) and space availability in the respective grade level; and ensuring there is no disruption of the instructional program. If approved, Transfer Request will be effective in the fall of the new school year. **Note:** Athletic eligibility is not granted with this transfer.

Return completed form via email at zoc@lausd.net Note: Incomplete applications will **NOT** be processed.

Zone of Choice _____

Student's Last Name	First Name	Middle Name	Date of Birth	Current Grade Level
Home address (street address, include apartment #)		City	Zip Code	
Home Telephone No.		Alternate Telephone No.		
Parent Last Name	First Name	Email Address		

REQUEST TRANSFER FROM: _____
(Complete Current School Name)

REQUEST TRANSFER TO: _____
(Complete Preferred School Name)

Reason for Transfer

Select reason for request and provide details in the blank space below – **REQUIRED.**

- Academic Interest
 Hardship
 Medical
 Sibling: _____
(Name, DOB and School)
 Other _____

I fully understand this request is a **One-Time Transfer** allowance between schools in my residential Zone of Choice and return rights are waived.

Parent Signature	Date	Student Signature	Date
------------------	------	-------------------	------

FOR SCHOOL OFFICE USE ONLY

SENDING SCHOOL

Current Middle School: Is student on track to promote to next grade level? _____ IEP/Eligibility (OHI, RSP, SDC, etc.) _____

OR

Current High School: Number of Completed Credits _____ Number of Credits Pending _____ IEP/Eligibility (OHI, RSP, SDC, etc.) _____

Comments: _____

Administrator's Signature: _____ Date: _____

RECEIVING SCHOOL

Decision: **Granted** **Denied** Administrator's Signature: _____ Date _____

Reason for denial: _____

OFFICE OF SCHOOL DESIGN OPTIONS – ZONES OF CHOICE OFFICE

Decision: **Granted** **Denied** Administrator's Signature: _____ Date _____

Reason for denial: _____