



2017-2018

Student Transfer Request

Choose Up to Six School Choices → One Form

Transfers Office
4120 N. First Street
Fresno, CA 93726
559-248-7538
Fax: 559-248-7481

STUDENT _____ Yes/No _____
(Please Print) First Name Last Name Special Ed? FUSD Student ID

Birth Date _____ Grade Level Requested _____ Home Address (Student) _____ Zip _____

Student's Current School: _____ Male/Female _____

Application and admission is not limited on the basis of race, color, national origin, sex, disability, sexual orientation, gender, ethnic group identification, or ancestry.

1 – Magnet and Specialty Schools - Choose up to two schools by labeling 1 and 2 to indicate first and second choice.
Students are selected by random lottery when space is available at the requested grade level.

Elementary Schools		Middle Schools	High Schools
Bullard Talent K-8		Baird 5-8	Design Science 9-12
Hamilton TK-8		Ahwahnee 7-8	Duncan Medical Academy 9-12
Yokomi Science TK-6 - Downtown Employment - Yes/No			Duncan Polytechnical Academy 9-12
Ewing Dual Immersion* PK-6	*Dual Immersion Applicants only: Student's first language: English/Spanish Sibling enrolled: Yes/No		Fresno High IB 9-12
Leavenworth Dual Immersion* PK-6			McLane Medical Research 9-12
Sunset Dual Immersion* PK-6			Roosevelt School of the Arts 9-12

2 – Admission Criteria Schools - Choose up to two schools by labeling 1 and 2 to indicate first and second choice.
Students are selected using academic admission criteria when space is available at the requested grade level. Ask if any additional information is required by the requested schools.

Elementary Schools	Middle Schools	High Schools
Manchester GATE 2-6*	Cooper IB Academy 6-8	Edison Computech 9-12
Yokomi GATE 2-5*	Computech Middle School 7-8	Patino School of Entrepreneurship 10-12
	Yosemite Dual Immersion 7-8	

*Elementary GATE applications are due March 1, 2017

3 – Other School Transfers - Choose up to two schools by entering the school names under the appropriate grade level.
Students are placed at the school if space becomes available at the requested grade level, program or school.

Elementary Schools TK-6		Middle Schools 7-8	High Schools 9-12
1		1	
2		2	

Circle: Indicate if this is for employment - Yes/No Indicate if this is - New/Renewal **PLEASE ATTACH VALID CHECK STUB**

Business Name _____ Address _____ Phone# _____

PARENT/GUARDIAN INFORMATION

I attest that all information on this form is true and accurate.

Signature of Parent/Guardian _____ Date _____

Parent/Guardian Name: _____

Email _____ Phone #1 _____ Phone #2 _____

On-time applications received on or before December 1st receive priority in selections.

Mail or deliver to: Transfers Office 4120 N. First Street Fresno, CA 93726

FAX to: 248-7481 (FUSD will not be responsible for faxes not received)