



Instructions for the School Choice Transfer Application

Questions?

Please contact the Office of School Choice and Parent Empowerment at 501-683-3162 or by email at ade.efa@ade.arkansas.gov

Important Deadlines and Application Submission

- The application period begins on January 1st and ends on May 1st. ***Does not apply to children of uniformed service members.***
- The application must be signed by the resident and nonresident district personnel.
- When the application has been signed and completed by the resident and nonresident district, please submit a copy to the Division of Elementary and Secondary Education. You may send it via e-mail: ade.efa@ade.arkansas.gov or postal mail:
 - Division of Elementary and Secondary Education
Attn: Public School Choice, Box 23
4 Capitol Mall
Little Rock, Arkansas 72201

School Choice Transfer Type

- **Public School Choice of 2015** (*District to District transfer*) – A parent or guardian may select this option when transferring from their resident district to a different district where they currently do not live. (A student may transfer using this option even if they do not currently attend the resident district.) Priority *may be* given to students who have siblings or stepsiblings who attend the nonresident district.
 - a. **Exemptions:**
 - A student cannot use Public School Choice to transfer to a different school within their district.
 - A student cannot use Public School Choice to transfer to a particular school within a different school district if transferring into the district.
 - A student cannot request to transfer to a different school that is under a current desegregation order. The current desegregation order list is [here](#).
- **Opportunity School Choice** (*School-to-School transfer within the same district for most applicants*) – A parent or guardian may select this option when transferring from one school within the same district to another school within the same district or out of certain school districts. You may qualify to transfer to a different school when:
 - a. **F-Rated School:** A student may transfer from an “F”-rated school to another school within the same district that does not have an “F”-rating or, if one is not available, to a school that does not have an “F” rating in another district.
 - b. **Level 5 Support:** A student may transfer from a district that has been classified as a school district in need of Level 5-Intensive support to a school district that has not been classified as in need of Level 5-Intensive support.

- c. **Siblings:** Priority is not given to students who may have siblings or stepsiblings who attend the nonresident district.
- d. **Effective period:** Opportunity School Choice shall operate as an irrevocable choice for one year and remain in effect until the student graduates as provided by law.

Section A – Student Applicant Information

- *Student demographic information:* Please write your student’s name, date of birth, and current grade in school. The gender and ethnicity questions are required by state law (Arkansas Code 6-18-227 (f)(2)(B)) and will be used for reporting purposes only.
- *Expulsions:* A nonresident school district may deny a school choice transfer application if the student is currently expelled from their resident school district. If your student is currently expelled, please write the date the student was expelled.
- *Sibling Information:* Please write the names and grades of siblings or stepsiblings who attend the nonresident school district.

Section B – Parent or Guardian Information

- *Contact Information:* Please write your name, address, phone number, and email address. Please sign the form.
- *Uniformed Service Family Information:* If you are a uniformed service member, please submit paperwork to show proof of residency on your assigned military base and current active-duty orders. Please turn in those documents with your completed school choice transfer form to the resident and nonresident school districts.

Section C – Resident School District of Applicant

- *Resident School District Information:* As the parent or guardian, you may write in the contact information for the resident school district.

The gray box is for district use only. Please have an employee at the resident district administrative office fill in the required information in that box. For your application to be complete, all the information must be provided by the resident district.

Section D – Nonresident School District of Applicant

- *Nonresident School District Information:* As the parent or guardian, you may write in the contact information for the nonresident school district.

The gray box is for district use only. Please have an employee at the nonresident school district administrative office fill in the required information in that box. For your application to be complete, all the information must be provided by the nonresident school district.



Application for School Choice Transfer

Submission Deadline: May 1st

Uniformed Service families are exempt from the deadline

School Choice Transfer Type (please choose one)

Public School Choice () (District to District)	Opportunity School Choice () School to School within the Same District or District to District if the Resident District is in need of Level 5 Intensive Support
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Section A – Student Applicant Information

Date: _____

Student Name: _____ Grade: _____

Date of Birth: _____ Sex: Female () Male ()

Is the applicant currently suspended, expelled, or been recommended for expulsion pending a hearing? Yes () No ()

If yes, date of expulsion _____ (if applicable)

Please indicate race/ethnic origin:

2 or More Races ()	Asian ()	Native Hawaiian/Pacific Islander ()
Hispanic/Latino ()	Native American/Native Alaskan ()	
White ()	African American ()	

Please list the student’s siblings or stepsiblings currently attending the nonresident school district:

Name: _____ Grade: _____

Name: _____ Grade: _____

Name: _____ Grade: _____

Section B – Parent or Guardian Information

Parent Name: _____ Phone number: _____

Home Address: _____ City: _____ Zip Code: _____

E-mail Address: _____

I understand that by signing this application electronically, my electronic signature is the legal equivalent of my handwritten signature on this application.

Parent/Guardian Signature: _____

Current active-duty uniformed service member? ()Yes ()No (If no, skip to section C; If yes, please submit military transfer orders that include the date of arrival, parent/guardian name, and proof of residency to both resident and non-resident school districts along with this form.)

Section C – Resident School District of Applicant

District and School Name: _____ County: _____

Address: _____

City: _____ Zip: _____ Phone Number: _____

Resident District use only

Date and Time Reviewed by District _____ LEA# _____

Student ID # _____ District Personnel Name _____

Signature _____ Title _____

Application status: Accepted () or Rejected () (due to a desegregation order of a federal court)

Date/Time Received: _____
(place date and time stamp here)

Section D – Non-Resident School District of Applicant
(please write one school and/or district name)

District and School Name: _____ County: _____

Address: _____

City: _____ Zip: _____ Phone Number: _____

Non-Resident District use only

Date and Time Reviewed by District _____ LEA# _____

Student ID # _____ District Personnel Name _____

Signature _____ Title _____

Application status: Accepted _____ or Rejected _____ (indicate reason for rejection)

- Rejection due to capacity (Max student-to-teacher ratio) ()
- Rejection due to a federal court desegregation order ()

If rejected, parent notified by: Staff Name _____

Date/Time Received: _____
(place date and time stamp here)