



# 2022-2023 Student Transfer Request

Electronic Application available on the Fresno Unified website

**Mail or deliver applications to:**

Transfers Department

4120 N. First Street Fresno, CA 93726

Phone: 559-248-7538

Fax\*: 559-248-7481

Email: [TransfersDepartment@fresnounified.org](mailto:TransfersDepartment@fresnounified.org)

STUDENT \_\_\_\_\_ **Yes No**  
 (Please Print) First Name \_\_\_\_\_ Last Name \_\_\_\_\_ FUSD Student ID \_\_\_\_\_  
Special Ed? \_\_\_\_\_

\_\_\_\_\_ **Male Female Non-Binary**  
 Birth Date \_\_\_\_\_ Grade Level Requested \_\_\_\_\_ Home Address (Student) \_\_\_\_\_ Zip \_\_\_\_\_  
(Circle One)

*May choose up to two schools in each category. Mark 1 or 2 to indicate first or second choice.*  
 Application and admission is not limited on the basis of race, color, national origin, sex, disability, sexual orientation, gender, ethnic group identification, or ancestry.

Other School Transfers	Magnet Schools	Dual Language Immersion Programs
For any Fresno Unified school not listed on this form, write in the name. Transportation is the responsibility of the parent/guardian.	Yokomi TK – 6 Parent Employed Downtown: Yes No Address _____	<b>PART A:</b> Student's Home Language (Circle One) English Spanish
1	Hamilton TK – 8 Bullard Talent K – 8	<b>PART B:</b> Choose a first or second choice Dual Language Immersion PK – 6 Ewing Dual Language Immersion PK – 6 Leavenworth
2	Baird 5 – 8 Cooper IB Academy 6 – 8	Dual Language Immersion PK – 6 Sunset Dual Language Immersion PK – 5 Wawona
Admission Criteria Schools	Ahwahnee 7 – 8 Design Science Middle College 9 – 12 Duncan Medical 9 – 12 Duncan Applied Technology 9 – 12 Fresno High IB 9 – 12 Patiño School of Entrepreneurship 9 – 12 School of the Arts at Roosevelt 9 – 12 <i>Students must be enrolled in two fine arts courses</i>	Dual Language Immersion 7 – 8 Yosemite Dual Language Immersion 9 – 12 McLane <b>Transfers to Dual Language Immersion Programs:</b> <ul style="list-style-type: none"> <li>Lottery selection by primary language is used when space is available.</li> <li>Transportation to attend a dual language immersion program is the responsibility of the parent/guardian.</li> <li>Enrollment into dual language immersion classes at <b>1<sup>st</sup> grade or above</b> requires tested proficiency in both languages. If applicable, I agree to have my child tested for the DI program. <b>Initial</b> _____</li> <li>Site based Dual Language Immersion Programs are also available. Resident students may participate in the program. Discuss participation at the school site.</li> </ul>
<b>Admission Criteria Schools</b> Admission Criteria schools require students meet specific academic or other criteria in order to be considered for admission. Contact the Transfers Department for additional details. For information on GATE placements refer to the Fresno Unified's GATE website.		
Edison Computech 7 – 12 Sunnyside Doctor's Academy 9 – 12 <i>Additional Application Required (Contact Sunnyside for more information) No Transportation</i>		
<b>Important information regarding all transfers:</b> <ul style="list-style-type: none"> <li><b>On-time applications received on or before December 1<sup>st</sup> receive priority for selection.</b></li> <li>Students are selected for most schools using a random lottery when space is available at the requested school and grade level.</li> <li>Transfers are good to the highest grade level at the assigned school.</li> <li>A new transfer must be completed when entering middle or high school.</li> <li>Transfers may be revoked for excessive tardies, absences, or brought to school early or left excessively late. Revocation may occur if student fails to uphold appropriate behavior standards or has poor academic performance.</li> </ul>		

**I attest all information on this form is accurate. If any court order pertains to this student, the other parent may have to sign in agreement. Transfers may be revoked for false information.**

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_ Email \_\_\_\_\_

Parent/Guardian Print Name \_\_\_\_\_ Parent Birth Date \_\_\_\_\_ Phone #1 \_\_\_\_\_ Phone#2 \_\_\_\_\_

**Out of District Employment-Related Transfer\*** (Attach proof of employment, annual verification is required)

Business Name \_\_\_\_\_ Address \_\_\_\_\_

