



Glenview School District 34
 1401 Greenwood Road
 Glenview, Illinois, 60026-1511
 www.glenview34.org

Out-of-State Student Transfer Form

*In accordance with Section 2-3.13b of the School Code,
 no school district is required to admit a new student who is transferring from an out-of-state public
 school unless the parent or guardian of the student certifies in writing that the student is not currently
 serving a suspension or expulsion imposed by the school from which the student is transferring.*

NAME OF STUDENT (Last, First, Middle)	BIRTHDATE (Month, Day, Year)	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	GRADE
ADDRESS OF STUDENT (Street, City, State, Zip Code)			
NAME OF PARENT OR GUARDIAN			
DISTRICT NAME AND NUMBER TRANSFERRED FROM		DISTRICT ADDRESS (City, State, Zip Code)	
NAME OF SCHOOL STUDENT TRANSFERRED FROM		NAME OF PRINCIPAL AT SCHOOL	

Please check (✓) the appropriate box.

I hereby attest the above student is *“in good standing”* and that all medical records for the above student are up-to-date and complete as of the date of this form.

“In good standing” means that the student is not being disciplined by an out-of-school suspension or expulsion and is entitled to attend classes.

SIGNATURE OF PARENT OF LEGAL GUARDIAN	DATE
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