



# PORTLAND PUBLIC SCHOOLS

## PETITION TRANSFER FORM



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### General Transfer Information

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- Use the attached application to file a **hardship petition** to a different neighborhood school or PPS focus option, or to access a grade level not open through the lottery or a board-approved transfer guarantee.
- If you are new to PPS and live in the Jefferson cluster, you have a **dual assignment** choice of a comprehensive high school or Jefferson Middle College for Advanced Studies. You must designate a high school, which will become the school you will attend if you do not receive a transfer. Contact the Enrollment & Transfer Center for more information about dual assignment.
- To request transfer to **Alliance** or a **PPS charter school**, please contact the school directly.
- Students who live **outside of the PPS boundary** cannot use this application, as it does not comply with state laws for interdistrict transfers. A separate lottery for students from other districts is held in May.

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### Hardship Petition Information

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A basic principle of the petition process is that every school must strive to meet the needs of students assigned there. The petition system is an opportunity for problem solving: Families explain why their child's needs are not met at the neighborhood/current school and/or how transferring to a different school would remedy this, and the family's neighborhood/current school weighs in about whether the school can remedy the family's concerns and meet the child's needs.

Petition approval requires verification that a student's health, safety or educational well-being will be better served away from their current school, as well as available space at the requested school.

Petition decisions are made on a case-by-case basis, and can take several weeks to complete. Forms may be submitted at any time. For the best chance of placement, please submit petitions by the end of the lottery transfer cycle.

#### After you submit your transfer application...

- Transfer results will be sent to families one-three weeks after the application is submitted. Wait times may be longer when volume is heavy.
- Students who do not receive one of their choices, or who do not meet mandatory requirements, will be assigned to their neighborhood, dual assignment or currently enrolled school/program.
- Waitlisted students may be offered placement up to the 20<sup>th</sup> date of the school year.
- If a school is requested by a parent of a special education student on an IEP, the choice school may not be granted if it is determined that the student may not receive a free & appropriate public education at that school.
- Approved transfers and dual assignment designations are intended to last through the highest grade of your new school. Any future change in schools requires approval from the Enrollment & Transfer Center.
- Families enrolling their children for the first time, or who move to a different address, must provide two pieces of proof of residence to their neighborhood or current school. An approved transfer may be revoked if a student moves to a different school neighborhood or district before the start of the school year, or provides a false home address.

**Enrollment and Transfer Center:**  
501 N Dixon St, Suite 140, Portland OR 97227  
**Email:** [enrollment-office@pps.net](mailto:enrollment-office@pps.net)

[www.pps.net/schoolchoice](http://www.pps.net/schoolchoice)

**Mailing Address:**  
P.O. Box 3107, Portland, OR 97208-3107  
**Telephone:** 503-916-3205

*Portland Public Schools recognizes the diversity and worth of all individuals and groups and their roles in society. All individuals and groups shall be treated with fairness in all activities, programs, and operations, without regard to age, color, creed, disability, marital status, national origin, race, religion, sex, or sexual orientation. Board of Education Policy 1.80.020-p*



# PETITION TRANSFER FORM



## Parent or guardian information

Correspondence language:  English  Spanish  Vietnamese  Chinese  Russian  Somali

How did you hear about us? \_\_\_\_\_

Relationship to student (check one):  Mother  Father  Guardian  Other: \_\_\_\_\_

1. Parent first name: \_\_\_\_\_ Last name: \_\_\_\_\_

Phone number (must enter at least one) Mobile: \_\_\_\_\_ Other phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Contact preference (must check at least one)**  Email and text  Email only  Text only

Home address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Additional parent or guardian information

Correspondence Language:  English  Spanish  Vietnamese  Chinese  Russian  Somali

Relationship to student (check one):  Mother  Father  Guardian  Other: \_\_\_\_\_

2. Parent first name: \_\_\_\_\_ Last name: \_\_\_\_\_

Phone number (must enter at least one) Mobile: \_\_\_\_\_ Other phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Contact Preference (must check at least one)**  Email and text  Email only  Text only

Home address: \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Student information

Student first name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last name: \_\_\_\_\_

Gender:  F  M  Non-binary Birth-date: \_\_\_\_\_ Pupil ID#: \_\_\_\_\_

Student lives with:  Parent/Guardian 1  Parent/Guardian 2  Both Parent/Guardian 1 and 2

Current school/program, if any: \_\_\_\_\_

Current Grade: \_\_\_\_\_ Grade applying to: \_\_\_\_\_

Is your student in foster care?  Yes  No Does your student qualify for Title X/Homeless services?  Yes  No

Does your student qualify for Special Education Services or 504 Accommodations?  Yes  No

Are you interested in your child participating in Oregon School Activities Association (OSAA) teams?  Yes  No

*If "YES", note that athletic eligibility is determined through a separate process. Participating in organized practices or camps or contacting coaches at the requested school while this transfer request is under consideration may jeopardize your child's OSAA eligibility.*

## TRANSFER CHOICES

Please list up three school(s) you would like your child to attend in order of preference.

#1 \_\_\_\_\_

#2 \_\_\_\_\_

#3 \_\_\_\_\_

## Transfer Reasons

Please select all that apply

**Attend school with a sibling:** \_\_\_\_\_  
Sibling first name Last name Grade Date of birth

**Attend my neighborhood school** (only for students currently on transfer at a different school)

**Transfer due to boundary change or other School Board Guarantee**

**Enroll in a Dual Language Immersion program:** Please indicate the language your student has been speaking and listening to with a parent or guardian since birth.

Chinese English Japanese Spanish Russian Other: \_\_\_\_\_

**Describe the language(s) your child understands:**

- No English
- Mostly another language and a little English
- English and another language equally
- Mostly English and little of another language
- Only English

If Only English, please describe your student's prior immersion program experience, if any: \_\_\_\_\_

**Enroll in a thematic focus option program**

**Childcare needs.** \_\_\_\_\_  
Provider name Address Phone

Do you receive a discount for service with this provider that would not be available elsewhere?  Yes  No

**Transportation needs.** Explain in the space below the transportation hardship to your neighborhood school and how it will be improved if your child transfers to your requested school(s).

**Concern about student safety and/or well-being.** Describe your concerns and specific incidents that occurred at school, any attempts to resolve or address the circumstances, and the outcome. How will the situation be improved through transfer? What would be the impact to the student if the transfer is not granted?

**Other Reason.** Explain your reason for requesting a hardship transfer and why you feel it is an extenuating circumstance.

**Enter additional petition information here, and on the back if needed**

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**Have you worked with the administrator of your student's current school, or the school your student is expected to attend next, in order to resolve your concerns?**  Yes  No If yes, what was the outcome? \_\_\_\_\_

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By signing below I acknowledge I have read and agree with the information on page 1 of this packet.

\_\_\_\_\_  
Name (print please)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

