Topic: Secondary Schools – Out of Area Transfer Request

Effective: October 2011

Cross Reference: HDSB Elementary Schools -- Out of Area Transfer Administrative

Procedure

Revision Dates: October 2012, 2014, 2015, 2018, October 2021

Review Date: October 2024

Responsibility: Superintendent of Education (School Operations)

INTENT STATEMENT:

All Halton District School Board (HDSB) schools are able to effectively support students' academic and well-being needs. As such, students are encouraged to attend their designated home school. However, the Board provides an opportunity for students who are residents in the Halton region to apply for enrolment in a Halton school outside their regular school attendance area in schools where there are sufficient pupil spaces to accommodate them. This is referred to as "transfer of school". The process for application for school transfer in HDSB secondary schools is outlined in this procedure.

Secondary Out of Area Transfer of School requests has two distinct processes:

- 1. Students moving from Grade 8 into Grade 9
- 2. Students entering Grades 10, 11, 12

APPLICATION FOR TRANSFER OF SCHOOLS - Student moving from Grade 8 into Grade 9

The HDSB Out of Area Transfer Request Application Form (Appendix A) is required for Grade 8 to Grade 9 requests. Applicants are expected to meet with their home school Principal to discuss their reasons for requesting an out of area transfer, as well as review the programs offered at the home secondary school.

The approval of applications is dependent on the following:

- school is designated as an Open School;
- availability of pupil spaces and class size guidelines;
- no need to hire additional staff or increase instructional resources;
- no additional costs to the Board.

Please note the following exceptions:

- Siblings of students admitted to specialized programs (e.g., ESL or Special Education) or granted transfer in other schools, must apply for transfer of schools. The application (Appendix A) must be submitted by the parent/guardian and is subject to the above criteria for decision by the requested school.
- Requests for regional programs in a region other than one's own are considered transfer of school requests.
- Special Education placements do not fall within the parameters of requesting school transfer.

Students granted out of area transfer are not eligible for board transportation.

Generally, decisions will be forwarded to applicants by **the first week of March**; however, some decisions may be held pending confirmed enrolments.

PROCEDURE:

Grade 8 into Grade 9

1) In October of each year, the Administrative Council will review preliminary enrolment projections, and subsequently identify the status of schools with respect to transfer of schools for the following school year. An Open to School Transfer List will be posted on the Board website and communicated to all schools in November. Schools will fall into one of two different categories, depending on the relationship between capacity and enrolment:

- a) Open Schools: The school has space available and may accept applications for consideration for transfer of school.
- b) Closed Schools: The school has reached its capacity and cannot approve applications for Transfer of School.
- 2) An application for Transfer of School must be submitted by the second Friday in January to the Principal of the home secondary school, using the Application for Grade 8 into Grade 9 Transfer of School Form (Appendix A). Applications are received and date/time stamped at home school. Upon receipt of an application, the home school Principal will confer with the parents to clarify the reasons for the application and to reinforce that no decisions are made until such time as enrolments are clear. Meetings with school personnel in the requested school should be arranged only upon approval of the Transfer of School application.
- 3) Staff in all schools are expected to promote the equality of outcomes of all HDSB Grade 9 programs and the expectation that students attend their designated home schools to all students and parents/guardians. Families inquiring about school transfer should be directed to the Principal of the designated home secondary school.
- 4) Decisions regarding all applications will be communicated by the requested secondary school Principal to the applicant, the home high school and the current elementary school by **the first week of March**, using Appendix A and will attach Appendix B.
- 5) Students are not eligible for Board transportation.
- 6) Late applications will be considered jointly by the Principals and Superintendents of the home and requested schools, subject to available student spaces as with all other Secondary School Transfer of Schools requests.
- 7) Appeals to reconsider an application are permitted in situations where "extraordinary circumstances" need to be assessed. Appeals are to be submitted in writing by parents/guardians to the requested secondary school Superintendent of Education with a copy to the home school Principal prior to the end of June. In cases where there is a medical reason for an appeal, the applicant must have their Registered Health Professional complete the "Transfer of Schools Health Information Form" (Appendix C). Decisions regarding appeals are made in consultation with the Principals involved and communicated to the applicant by the Superintendent of Education. The decision of the Superintendent is final.

APPLICATION FOR TRANSFER OF SCHOOLS – Grade 10, 11, 12

The process for application for transfer of schools for Grades **10**, **11**, **12** occurs through the home school Principal and the Principal of the requested school. This may be initiated by parents/guardians and/or students of legal age at any time of the year and requires the approval of both Principals.

The process is initiated through informal means (meeting, email or phone call) and does not require a formal application process. Requests should be made prior to the second Friday in January for September consideration.

The decision is based on specific programming requests and availability.

The decision of the home school Principal is final.

SECONDARY OUT OF AREA TRANSFER OF SCHOOLS TIMELINES

November	An "Open for Transfer of Schools" List of secondary schools will be posted on the Board website and communicated to all schools. Secondary schools may inform families at their Grade 9 Information Evenings the school's status (i.e., "open school" or "closed school".
Prior to Second Friday of January	Completed applications (Grade 9) must be submitted to the home secondary school. Requests for Transfer of Schools (Grade 10, 11 or 12) must be made to the home Principal.
By First Week of March	Decisions regarding all applications are communicated to the applicant (i.e., Appendix A and Appendix B).
Prior to end of June	Appeals received and processed by the requested school Superintendent of Education. Appeal decisions communicated to parents/guardians by the Superintendent of the requested school.



Application for Grade 8 into Grade 9 Out of Area Transfer Request

It is a general expectation that students attend the secondary school designated for their attendance area for their Grade 9 year. $\frac{1}{2}$

Application form is to be returned to the home secondary school by the parent/guardian or student prior to the second Friday in January.

If the request is granted, it is understood that the Board will not provide transportation for the student.

Student I.D. #		Exceptional (I.P.		Yes	No	
E.S.L.: Yes No		French Immersio	n:	Yes	No	
Student's Name:		Applicati	on Date: _.			
Given Names	Surname	/ tppeac.	o., 2 a.c.,	Day	Month	Year
Student's Address:		Т	elephone	()	le	
Street Tov						
Birth Date: DAY / MONTH / YEAR	Parent/Gua	rdian Email:				
Designated Home Secondary School:						
Present Elementary School:						
Requested Secondary School:						
Open Closed	If granted, placement to commence:					
Reason for Request:						
•						
Name of Parent or Guardian (please	Signature of Parent/Guardian					
Date / Time Received:						
Dute, Time Received.			ature of H	ome Sch	nool Principa	Ī
To be completed by the Requested Scho	ol (Attach An	nendiy B to Pare	nt/Guardi	an conv	of decision)	
Date Received:	·	Approved		ot Appro		
		Approved	INC	ot Appro	oveu	
Complete one:						
A. Student has been accepted at	Name of Sc	in _. hool	Progran	n/Year/(Grade	
Special Conditions:			J			
special conditions.						
B. Student has not been accepted becau						
Signature of Requested School Principa						

Appendix B

Application for Secondary Out of Area Transfer Procedures and Conditions

Out of Area Transfer Request Granted

- If you have not done so already, the student is to contact the requested school to register and select courses for the upcoming school year.
- Transportation to and from school will be your responsibility as a parent/guardian.
 - The Halton District School Board does have a Courtesy Seat process whereby those students who are not normally eligible for transportation can apply for school buses with empty seats. If there is a bus route that is close to your house and you would like to apply for a seat as a Courtesy Seat Rider on that bus, please visit Halton Student Transportation Services at http://www.haltonbus.ca for procedures and forms. Courtesy Seat decisions are usually determined in October. However, the Board is not required to provide transportation for students where an out of area transfer request has been approved.

Out of Area Transfer Request Denied

- If you wish to appeal this decision, please do so in writing within 10 days of receipt of notification. Send your appeal to the Superintendent of Education of the requested school with a copy to the Principals of the home and requested secondary schools.
 Appeals are considered according to extraordinary circumstances.
- A review of student and class organizations will be completed in June. At that time, space availability will be determined. Those who have appealed will be contacted with a decision prior to the end of June. The decision of the Superintendent is final.

□ Initial Form □ Follow-up Form



Out of Area Transfer Request Health Information Form

Parent/Guardian/Adult Student's Consent & Authorization

Name of Parent/Guardian/Adult Student

I consent to the collection, use and disclosure of personal health information from my Registered Health Professional to the Halton District School Board pursuant to the Personal Health Information Protection Act and Municipal Freedom of Information and Protection of Privacy Act for the purposes of providing educational programming and services pursuant to the Education Act. I authorize the Registered Health Professional involved with my child's treatment to provide to me this form when completed, containing information about any health related needs/symptoms/ limitations/ restrictions requiring accommodation for attendance at a school other than the student's home school. I acknowledge and accept that the Halton District School Board will not be responsible for any costs associated with the completion of this form.

Date

Student's Last Name	First Name		Date of Birth (Day Month Year)				
Full Address (No., Street, Apt., City)		Postal Code	Telephone Number				
Student's Home School Grade		School Requested Through Transfer of Schools Process					
Signature of Parent/Guardian/Adult Student							
To be completed by the Registered Health Professional:							
Date of Examination	Is health treatment currently being provided? Yes No						
Date of last treatment provided	Other Comments						
The Halton District School Board endeavors to provide a safe environment/workplace for all students while meeting our mandate under the Education Act. In the present case, the student's parent(s)/ guardian(s) or adult student is requesting permission to attend a school other than the student's home school in order to accommodate the student's needs.							
Please complete the following: Diagnosis:							
Does the student have a medical diagnosis or condition that might impact academic performance and/ or safety and well-being at school? Yes No							
If yes, please describe how academic performance and/or safety and wellbeing might be impacted:							

Transfer of School Request Attendance							
Please describe how the student's needs a home school:	ind/or diagnosis ca	an not be supported at their designated					
Describe the school conditions that would support these needs. Attendance at a school out of the student's home school will impact the student's needs identified above and/or diagnosis and/or well-being:							
Name of Health Care Professional		Date					
Full Address (No., Street, Apt.)	City	Postal Code					
Phone Number	Signature						