**STUDENT TRANSFER FORM Fax: 763-268-2534**

**Directions:**

1. If a student takes one or more domains of the **ACCESS for ELLs 2.0** test in one district and transfers to another district, fax DRC customer service a complete Student Transfer Form. Customer Service will process the transfer student record so that the student may finish testing at the receiving site within 48 business hours.
2. Do not use this form if the student moved out of state or out of the country. Instead, use a Do Not Process label for paper testing or call Customer Service for online testing. (Customer Service will purge the online record.)
3. Fill in all available information on the form.

|  |  |
| --- | --- |
| **Student Moved FROM (Sending Site):** | **Student Moved TO (Receiving Site):** |
| District/LEA Name |   | District/LEA Name |  |
| District/LEA Code |  | District/LEA Code |  |
| School Name |  | School Name |  |
| School Code |  | School Code |  |
| **Domains Completed***Place an X next to the domains completed.* | **Domains Completed***Place an X next to the domains completed.* |
| Listening |  | Listening |  |
| Reading |  | Reading |  |
| Speaking |  | Speaking |  |
| Writing |  | Writing |  |
| **Testing Mode Completed***Mark completed testing mode.* | **Testing Mode Completed***Mark completed testing mode.* |
| Online Paper | Online Paper |

Student: Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_

State Student ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person completing this form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_