School Transfer Form  
D.C. Opportunity Scholarship Program  
August 1, 2020 – July 31, 2021

In order for any remaining scholarship funds to be available for a DC Opportunity Scholarship Program (OSP) student transferring to another participating school during the school year, all sections of this form must be completed prior to payment being processed. Please fax completed form to 202.330.5002 or email to robertu@servingourchildrendc.org

Section 1: For OSP Parent/Guardian

Name of Student: _______________________________ Student Number: __________________

Name of New School: ____________________________________________________________

School Name

Signature of Parent/Guardian ___________________________________________________

Name of Parent/Guardian _____________________________________________________________________________

Section 2: For ENTERING SCHOOL (Principal or School Administrator)

Name of Entering School: __________________________________________________________

Student’s First Day of Attendance: ____________________________  
☐ Attending since first day (2018-19)  
☐ Summer school only

Student’s Grade Level: __________________  
K 1 2 3 4 5 6 7 8 9 10 11 12

Circle grade level for 2018-19

School Certification

By signing below, I am affirming the above named student has completed registration and is enrolled for the 2018-19 school year at the above named school. I also agree to report to the OSP administrator within ten (10) days if this student is no longer attending the school or has five (5) or more consecutive days of unexcused absences. I also understand the student listed above may not have the maximum scholarship amount available upon entrance to the school.

Signature of School Official ___________________________________________________________________

Name of School Official (Print) __________________________________________________________________

Date ___________________________________________________________________

Section 3: For OSP Use Only

Name of Exiting School: __________________________________________________________

Exit Confirmation Form Received?  
☐ Yes  
☐ No

Date of Last Day of Attendance: ____________________________

Date of Receipt of Exit Confirmation Form: ____________________________

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