

Instructions for 3DE In-System Transfer

If the parent submits an in-system transfer, they will have to go all the way through to the student pleat. When they get there, under demographics select yes for the question: "Are you approved to attend a school outside your attendance zone?" Then under Attendance Zone - have them select "Full-Time Online/Magnet Program/School" then select the program and approved school. The parent will still need to continue through the rest of the application and then submit.

Where Students Come First

Infinite Campus Online Registration

Application Number [REDACTED]

* Indicates a required field

✓ Student(s) Primary Household > ✓ Parent/Guardian > ✓ Emergency Contact > ▼ Student > Completed

Student Name: [REDACTED]

▼ Demographics

Enter the student's name exactly as it appears on the Verification of Date of Birth documentation. If your student has two last names, please enter both in the box marked "Last Name".

Note for Pre-K Applications: Completing this application does not guarantee enrollment into the Pre-K program. There are a limited number of locations/spots, please contact your local school for more information.

Note for the PreSchool Special Education Request for Assistance process: This option should only be used when parents/guardians are concerned their student may be exhibiting signs of a developmental delay or disability. To submit the additional information needed for the PreSchool Request for Assistance process, select **PS** from the **Enrollment Grade** field.

For all students, after form is submitted online, parents must visit the attending school with documentation to complete the registration process.

Legal First Name	[REDACTED]	Gender	Female	Enrollment Grade	01
Legal Middle Name	[REDACTED]	Birth Date	[REDACTED]	Boundary School:	Stonewall Tell Elementary
<input type="checkbox"/> <-- If no middle name, please check here		Was this student born in the United States?	Yes	School System of Residence	Fulton County
Legal Last Name	[REDACTED]	In what state was this student born?	North Carolina	County of Residence	Fulton County
Suffix		Foreign Exchange*		School	Esther Jackson Elementary
Nickname		<input type="radio"/> Yes, this is a foreign exchange student		Are you approved to attend a school outside your attendance zone?	Yes
Primary Phone Number	() - -	<input checked="" type="radio"/> No, this is not a foreign exchange student			
Student Email Address					

* Indicates a required field

✓ Student(s) Primary Household → ✓ Parent/Guardian → ✓ Emergency Contact → **▶ Student** → Completed

Student Name: [REDACTED]

▶ Demographics

▶ Race/Ethnicity

▶ **Attendance Zone**

You have indicated in a previous question that this student has been approved to attend a school outside their usual school zone. Please indicate below which approval type they have been granted:

If YES, Select from the approved options:

Select Magnet Program: Full-Time Online/Magnet Program/School *
Select Name of Approved School: [REDACTED]

◀ Previous Next ▶

▶ Educational History

▶ Home Language Survey

▶ Relationships - Parent/Guardians

▶ Relationships - Emergency Contacts

▶ Health Services - Emergency Information

▶ Health Services - Health Conditions or Medications

▶ Signature/Disclaimer

Cancel Save/Continue