

# GOLD Child Portfolio Transfer Request

In order to initiate a GOLD child transfer between school districts, this *Transfer Request* must be completed and emailed to Becky Zessin [becky.zessin@unmc.edu](mailto:becky.zessin@unmc.edu).

- (1) Complete your district's portion below.
- (2) Identify and email the second district with your request.
- (3) After the *Transfer Request* has been completed by **both** districts, email to Becky Zessin.

Child Name: \_\_\_\_\_ DOB: \_\_\_\_\_

NSSRS#: \_\_\_\_\_

- ☐ Yes, this child has complete Part C or Part B entry data
- ☐ No, this child does not have Part C or Part B entry data

**Sending Administrator:** Complete the top portion of this form regarding the child's current program. If the child has team central members assigned, these members will still have access to the profile unless they are deleted. Please delete them from the child's profile prior to transfer occurring unless they will still be working with the child in the new school district.

|                                                                  |  |
|------------------------------------------------------------------|--|
| Current School District/Head Start/ESU                           |  |
| School Name                                                      |  |
| Teacher Name/ Class Name                                         |  |
| Online Administrator: I agree with the transfer this this child. |  |
| Name: _____ Position Title: _____ Date: _____                    |  |

**Receiving Administrator:** Complete the bottom portion of this form regarding the program the child is moving to.

|                                                                |  |
|----------------------------------------------------------------|--|
| Receiving School District/Head Start/ESU                       |  |
| New Class Name                                                 |  |
| Teacher Name/Class Name                                        |  |
| Online Administrator: I agree with the transfer of this child. |  |
| Name: _____ Position Title: _____ Date: _____                  |  |

- ☐ Both administrators have agreed to this transfer.

**Note:** This is a transfer of education records which is subject to the requirements of the Family Educational Rights and Privacy Act (FERPA). Failure to respond to this transfer request within 2 business days can result in the transfer of the child's profile by NDE to ensure accuracy of data reporting/collection requirements.

