

WAYNE COUNTY PUBLIC SCHOOLS REQUEST FOR STUDENT REASSIGNMENT

(Please Print Firmly)

Student Name: _____ DOB: _____ Race: _____

Complete Address: _____ City: _____ Zip Code: _____

Grade _____ (Please indicate student's current grade if completing form for the current school year. If completing the form for the next school year, put the grade the student will be entering.)

Parent/Legal Guardian: _____ Telephone: (H) _____ (W) _____

Mailing Address: _____ City: _____ Zip Code: _____
(If different from above)

1st Request _____ Renewal Request _____ School Year: _____

I hereby request transfer from: _____ to _____
(School/County)* (School/County)

* You are requesting a transfer from the school district that you currently live in even if your child never attended that school.

REASON FOR REQUEST: ___ Moved and wish to remain ___ Release to attend school in another county Other: _____

What school did your child attend last year? _____

Is this student in good standing at their present school? (Yes: ___ No: ___) **If no, attach written explanation.**

Has this student been suspended or expelled from **any** school? (Yes: ___ No: ___) **If yes, attach written explanation.**

Is this student served in any Exceptional Children's program? (Yes: _____ No: _____)

If you answered, "Yes" to the previous question, how is your child identified and served? _____

FAILURE TO TRUTHFULLY ANSWER THE ABOVE QUESTIONS MAY RESULT IN THE IMMEDIATE TERMINATION OF ANY APPROVED STUDENT ASSIGNMENT.

PER WAYNE COUNTY BOARD OF EDUCATION POLICY NO. 4130, PARENTS ARE REQUIRED TO PROVIDE TRANSPORTATION FOR STUDENTS RECEIVING TRANSFER APPROVAL.

STUDENTS GRANTED APPROVAL FOR STUDENT REASSIGNMENT MUST MAINTAIN SATISFACTORY ATTENDANCE, DISCIPLINE, AND GRADES AS JUDGED BY THE PRINCIPAL. FAILURE TO MAINTAIN THESE EXPECTATIONS MAY RESULT IN THE TRANSFER BEING REVOKED.

I have read and understand this form. I further understand that I will provide transportation for my child to and from school.

Date: _____

(Signature of Parent/Legal Guardian)

ADMINISTRATIVE USE ONLY

_____ Tentative Assignment Pending BOE Approval on _____ Transfer Denied

Signature of Authorized Official: _____ Date: _____

White - Central Office

Canary - School/Other County

Pink - Parent

Revised 11/2003