

2018-2019 APPLICATION FOR TRANSFER

(This application is NOT for employees)

GRADE: _____

Full Name of Student

Residence Address

Assigned to This School

Desire Transfer to This School

Desired Effective Date of Transfer

My child currently receives Special Education services: Yes _____

No _____

TYPE OF TRANSFER REQUESTED (check):

_____ Safety of Student, Other Students,
or Faculty

_____ Alternative School Placement

_____ GA DHR or GA DJJ Placement

_____ To Serve Student with
Disability

_____ Change in Residence or
Attendance Lines

_____ Military

REASONS FOR TRANSFER (explain fully/attach additional sheets if necessary):

CERTIFICATION BY PARENT/GUARDIAN/LAWFUL CUSTODIAN

Now comes the undersigned parent/ guardian/ lawful custodian, who, being first duly sworn, states on oath that the facts set forth in the foregoing Application are true and correct.

Signature of Parent/ Guardian/ Lawful Custodian
Printed Name: _____

Telephone Number

Sworn to and subscribed before me,
this _____ day of _____, 20____.

(NOTARY SEAL)

Notary Public
My Commission Ends: _____