

Nonresident Student Transfer/Registration Form

Form to be used by NONRESIDENT students requesting admission.

Student's Name _____
Last First Middle Initial

Home Address _____ Phone # _____

Present District and School _____ Present Grade _____

Requested School _____ For School Year _____ Grade _____

Date of Request: _____

Reason for Transfer _____

NOTICE

1. Transfers involving athletics will be in accordance with Kentucky High School Athletic Association (KHSAA) By-Laws.
2. Requests for transfer for middle and high school students are considered incomplete until class scheduling information has been submitted to the prospective school.

I UNDERSTAND THAT, IF APPROVED, THIS ASSIGNMENT WILL BE GRANTED FOR ONLY ONE (1) SCHOOL YEAR AND THAT ANY SPECIAL TRANSPORTATION NEEDED IS THE RESPONSIBILITY OF THE PARENT/GUARDIAN.

Parent/Guardian's Signature Date

To BE COMPLETED BY CENTRAL OFFICE PERSONNEL

Application Approved Disapproved Date _____

Parent contacted Yes No Date _____

Present School Contacted Yes No Date _____

Requested School Contacted Yes No Date _____

Professional recommendation, if required _____

Superintendent/designee's Signature Date

Review/Revised:8/21/01