Appling County Board of Education

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Appling County School System Transfer Request Form

House Bill 251 (2009) Public School Choice

Under a 2009 state law (O.C.G.A. 20-2-2131), parents may request a transfer to another public school within their local school district to specified schools and grades as designated as possibly having space available. If you wish to request a transfer, please complete the information below. The deadline for receipt of this written request is July 16, 2020 at 4:30 p.m.

| Student Information | |
|--|---|
| Date: Gra | de (2020-2021 School Year) |
| Student's Name | |
| Birth Date (MM/DD/YYYY) | Age |
| Name of Custodial Parent or Guardia | an requesting transfer |
| Home Address(Street) (City) (State) (Zip) | |
| Phone (| E-mail |
| Which school is the student is zoned | to attend in 2020-2021? |
| Parent Request for School Transfe | <u>er</u> |
| I,, a (Parent or Guardian's Name) | am requesting a transfer for(Student's Legal Name) |
| and from the school is my respo | the system. If approved, I understand that transportation to nsibility at my sole expense. I fully understand that my child asfer to a choice of schools if space is available at the time this pol system. |
| Parent/Guardian Signature: Parents: Please complete this form a your student. | Date:and return to the <u>Principal of the school you wish to transfe</u> |
| Approved by: | New (Otterly Date |
| Principal's Signature | Name of School Date |

Schools: Keep original in student's enrollment file. Send a copy to Transportation Department