2020-2021 <u>New</u> Intra-County Transfer Request Form

PLEASE TYPE OR PRINT <u>LEGIBLY</u>

I hereby request that my child, ______ be considered for transfer from ______ School _____ Grade to ______ School _____ Grade beginning the 2020-2021 school year. I understand that by requesting this transfer my child will follow the rules and regulations established by the transferring school within the system, and the rules and regulations established by the Henry County Board of Education. I also understand that as the parent/legal guardian, I must assume responsibility for transporting my child(ren) to and from school. Furthermore, I understand that my child(ren) may not act as a participant in any athletic team, club, or organization for one (1) school year after such approved transfer. *This form is to be returned to the School no later than March 20, 2020.*

Parent/Legal Guardian Signature	Date		
Address		Phone Number	
		Office use	
Date/Time Received:	by:_		
	<u>Qualifi</u>	cation Checklist	
Acceptable attendance rate		Siblings/Grade	
Average/Above Average Acade	mic Scores		
Satisfactory Discipline Record			
Available Space			
Approved	Not A	Approved	
Principal Approval/Date		Superintendent Signature/Date	