

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 of Residence _____ 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. THE ONE (1) YEAR ASSIGNMENT MAY BE "REVOCATED" AT ANY TIME DURING THE SCHOOL YEAR DO TO 1) CLASS CAPS, 2) DISCIPLINARY ISSUES, 3) ATTENDANCE ISSUES, OR 4) ACADEMIC PROGRESS.

_____ *Parent/Guardian's Signature* _____ *Date*

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TO BE COMPLETED BY CENTRAL OFFICE PERSONNEL

Application	<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Date _____
Parent contacted	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date _____
Present School Contacted	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date _____
Requested School Contacted	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date _____

Professional recommendation, if required _____

_____ *Superintendent/designee's Signature* _____ *Date*