

**Prince William County Public Schools
STUDENT TRANSFER REQUEST FORM**

Student Transfer Request Forms for students in grades 1-12 must be received between **January 2 and April 30**.

Student Transfer Request Forms for Kindergarten students will be accepted starting the first day of Kindergarten registration.

INSTRUCTIONS: Carefully read the information provided in Regulation 721-2, Student Transfers – High School or Regulation 721-1, Student Transfers - Kindergarten/Elementary/Middle and in "Frequently Asked Questions" before completing this application. Complete Part I and submit the application to the base school principal no later than April 30 prior to the year in which the transfer is sought. **The student must attend the base/zoned school until a transfer decision is made.**

PART I. STUDENT TRANSFER REQUEST (please print/type) Initial or Renewal (circle one) Date _____

For School Year 20__ - 20__ Child's Grade during School Year Indicated _____

Base/Zoned School _____ Requested School _____

Student _____ DOB _____ Sex Male Female
Last First MI

Parent(s)/Guardian(s) Name _____ Home Phone (10 Digit) _____

Parent(s)/Guardian(s) Address _____

Street City ZIP Code

1st Parent(s)/Guardian(s) Place of Employment _____ Bus. Phone (10 Digit) _____

2nd Parent(s)/Guardian(s) Place of Employment _____ Bus. Phone (10 Digit) _____

Reason for Request: (choose one)

Child Care (Elementary/Middle) (Attachment IV, Reg 721-1 required) **Physical or Psychological Needs** (Attachment II, Reg 721-1/ 721-2)

SACC Closure **Designated Site Program** _____

Other (Refer to Reg. 721-1 or 721-2) _____

Parent(s)/guardian(s) are responsible for transportation. Transfers are valid for one year only unless the student has transferred for a designated site program. Designated site program transfers may be renewed using the procedures indicated in Regulation 721-1 or 721-2.

I certify that all the information on this application is correct to the best of my knowledge. I certify that the student involved in the request is not seeking a transfer to participate in extracurricular activities. In addition, I understand that transferring my high school student after ninth grade will change the VHSL activities eligibility status for the next 365 days.

Parent or Guardian Signature _____ Date _____

PART II. SCHOOL REVIEW AND RECOMMENDATION (office use only)

Base/Zoned School: _____

Comment: _____

Principal Signature _____ Date _____

Requested School: _____ Approve Deny

Reason: _____

Principal Signature _____ Date _____

PART III. APPEAL PROCESS (OFFICE OF STUDENT SERVICES use only)

Signature _____ Date _____ Approved Denied Letter sent