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***

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TO BE COMPLETED BY CENTRAL OFFICE PERSONNEL

Application	☐ Approved	☐ Disapproved	Date _____
Parent/guardian 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:7/17/2023