

2018-2019

Please print or type

**CUMBERLAND COUNTY SCHOOLS
Application for Voluntary Transfer**

Student Name _____

Approved / Denied

School Name (if approved) _____

Voluntary Transfer applications will be accepted beginning April 18, 2018 through May 31, 2018. All applications must be in the Student Assignment Office by May 31, 2018 to be considered for approval.

Student Name _____ Pupil ID# _____
(Your child's school can provide pupil ID number to you if you do not have it)

Address _____

City _____ State _____ Zip _____

Date of Birth _____ Home Phone # _____ 2018-2019 grade level _____

Name of Parent/Guardian _____

School student should attend (home school) _____

My child attended _____ School for the 2017-2018 school year.

School requested Choice I _____ Choice II _____

Is child served by the Exceptional Children's Program? Yes / No (circle one) Classification _____

My signature verifies that I understand the following:

- Failure to fulfill specified reason for transfer or failure to remain in good standing may result in rescission of transfer.
- Voluntary transfer is for the current school year only. **No subsequent transfer will be approved for this school year.** If approved, this will be the school assignment for your child's entire 2018-2019 school year.
- **Timely transportation must be furnished by parent/guardian.** Excessive tardiness and or excessive early check-outs **will result in a revocation of the transfer.**
- (IF APPLICABLE) I have contacted the principal of the school my child currently attends in order to resolve this issue prior to applying for voluntary transfer.
- **Athletics**
- If student is in grades 6-12, he/she cannot participate in athletic activities as defined within the Cumberland County Schools High School and Middle School Student-Parent Athletic handbook for 365 days from the first approved transfer date.
- If it is determined after approval that the athletic participation is a reason for the transfer, the transfer will be revoked.
- Consideration for transfer to Classical Schools and Early College High Schools are made through the Choice School application process only. Voluntary Transfer Applications for these programs will not be considered.

Signature of Parent or Guardian

Date

*** Parent: Please give complete and accurate explanation for requesting a voluntary transfer on *reverse side* of this form.**

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For office use only

_____ Approved

_____ Denied (does not meet criteria for Voluntary Transfer)

Signature: _____ Date: _____

Associate Superintendent/Student Assignment Manager

Parent,

Please give complete and accurate explanation for requesting a voluntary transfer. Applications require 10 working days to process. The Student Assignment Office will notify you of the decision by mail.

Please wait a minimum of 10 days before calling the Student Assignment Office.

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**Return completed application to: Cumberland County Schools
Student Assignment Office
P.O. Box 2357
Fayetteville, NC 28302**

Or Fax to (910) 678-2615

*******For Office Use Only*******

Application referred to_____ Date_____

Notes from Assignment Office:

Notes from principal(s):