

# Northampton County Schools

**PRE-K ONLY**

## SCHOOL TRANSFER REQUEST OR TRANSFER RENEWAL FORM 2024-2025

*Instructions:* Complete both sides of this form, sign and date it, and return it to the **Office of the Superintendent** by the **August 1** deadline. Please print clearly. If approved, no subsequent transfer will be granted for the 2024-2025 school year. Reference Board Policy 4120 and 4130 (available via [http://www.northampton.k12.nc.us/board\\_of\\_ed/board\\_policy\\_manual\\_or](http://www.northampton.k12.nc.us/board_of_ed/board_policy_manual_or) at the front office of each school) for important information about the school transfer process.

**PRINT CLEARLY** – COMPLETE ALL FIELDS

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|---|--|
| <b>Student Name:</b>  | <b>Student Date of Birth:</b>  |
| <b>Student PowerSchool ID # (found on report card):</b>   | <b>Student Grade 2024-2025 (THIS) School Year:</b>   |
| <b>Parent / Legal Custodian Name:</b>   | <b>Home Address/Domicile of Parent or Legal Custodian*:<br/>Physical:</b>  |
| <b>Is the student currently a Northampton County Schools Student?</b><br><br>YES _____ NO _____   | _____<br>_____<br><b>Mailing Address:</b> _____<br>_____   |
| <b>School Attended During the 2023-2024 (LAST) School Year:</b>   | <b>Is the Address Listed Above Located within Northampton County?</b><br><br>YES _____ NO _____                            |
| <b>School Requested for the 2024-2025 (THIS) School Year:</b>   | <b>Contact Information for Parent or Legal Guardian:</b><br>Work # _____<br>Home # _____<br>Mobile # _____<br>Email: _____ |
| <b>Does the Student Have an IEP or Section 504 Plan?</b> (This information will be used only to confirm that the IEP or 504 Plan can be implemented at the requested school.)<br><br>YES _____ NO _____ |  |
| <b>Is the Student Requesting Renewal of a Prior Transfer?</b><br><br>YES _____ NO _____   | <b>Are You a Permanent, Full-Time Employee of the Northampton County Schools?</b><br><br>YES _____ NO _____                |
| <b>If Yes, When Did the Original Transfer Become Effective? (semester/year):</b>  | <b>If Yes, Identify Your Primary Work Site:</b>  |

\*“Domicile” means the place a person actually lives as his or her established home, either permanently or indefinitely. Merely owning or renting personal or business property or residing somewhere temporarily does not constitute legal “domicile.” Reference Policies 4120 for further definitions and information about school assignment and transfers.

## FOR INITIAL TRANSFERS ONLY

**REASON(S) WHY THE SCHOOL TRANSFER IS REQUESTED (Check all that apply.)**

- A parent/legal guardian is moving from one school attendance area to another during the school year, and the request is to stay at the student's current school rather than be reassigned.
- A parent/legal guardian is employed as a permanent, full-time employee of the Northampton County Schools, and the request is to transfer to the school where the parent works or a school within the attendance area of the place the parent works.
- A sibling of the student has already been assigned to the school requested for the same school year, and the request is to allow the student to attend the same school as the sibling.
- The transfer is needed for hardship reasons related to before or after school-school daycare, and there is no viable alternative to a transfer. *(Specify below.)*
- The student wishes to take advantage of a specific, unique program offered at the school requested that is not offered at the student's assigned school. *(Specify below.)*
- Other. *(Note: Transfer requests that do not fall within one of the first five categories will be denied by the administration but may be appealed to the Board of Education.)*

**EXPLANATION OF REQUEST: (You may attach additional sheets and supporting documentation if desired).**

## FOR RETURNING TRANSFERS ONLY

(Complete this section, if you previously received a transfer to the requested school and wish to renew your transfer for this school year)

|  |  |
|--|--|
| <b>Reason(s) for Initial Transfer Request:</b> | <b>Do You Certify that these Reasons Remain Valid?</b> |
|  | YES _____ NO _____                                     |

## CERTIFICATION BY PARENT OR LEGAL GUARDIAN

I certify that I am the natural parent or legal guardian of the student identified above, that I have legal authority to submit this request on behalf of the student, and that all of the information provided in this form (along with any attachments) is true and accurate to the best of my knowledge. I understand that, if this transfer is granted, the parents/guardians will be solely responsible for providing transportation to the requested school. I also understand that this transfer may be revoked at any time if such issues as persistent inappropriate behaviors or excessive tardies arise after the transfer or that if determined that I provided false information in connection with this process.

Name (Printed): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NORTHAMPTON COUNTY SCHOOL USE ONLY:**

\_\_\_\_\_ Approved    \_\_\_\_\_ Denied

PreK Coordinator/Director \_\_\_\_\_ Date \_\_\_\_\_

Superintendent Signature \_\_\_\_\_ Date \_\_\_\_\_