



**SCHOOL DISTRICT NO. 8 (KOOTENAY LAKE)
STUDENT REQUEST FOR TRANSFER FORM**

S.3

Date of application: _____ Date received: _____

Student name: _____ Date of Birth: _____

Street address: _____ Telephone: _____

_____ (Include Postal Code)

Attendance area school: _____ Present Grade: _____

School requested: _____ Effective Date: _____

Reason for request:

Is the student on an IEP or receiving learning assistance? If yes, please explain:

Does the student have a special education category (i.e., severe learning disabled, etc?) If yes, please explain:

Parent/guardian signature: _____

_____ *Signature - Principal of current catchment school*

_____ *Signature - Principal of school requested*

Space Available: Yes _____ No _____

Comments:

Signature of Director of Student Services (if applicable)

District Use Only

Approved: _____ Not approved: _____ Transportation (yes/no) _____

Signature of Superintendent of Schools/designate

Comments:

cc: Catchment school, Receiving School
Director of Instruction (Student Services) (if applicable)
Transportation Department (if applicable)

Revised: February 2006