



LATE - PENDING

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

S.3

Note: Before completing form, please review [Board Policy #461 School Choice & Catchments](#)

Parent/Legal Guardian: _____ Telephone #: _____
 Student name: _____ Date of Birth: _____
 Street address: _____ Proof of residence required (new SD8 registrants)
 City & Postal code: _____ Effective Date: _____
 Attendance area School: _____ Grade at Effective Date: _____
 School requested: _____
 1. Reason for request: _____

 Date & Time received by School: _____ am / pm

2. Is the student on an IEP (*Individual Education Plan*) or receiving learning assistance? *If yes, please explain*

3. Does the student have a Special Education category (*i.e. severe learning disabled, etc.*)? *If yes, please explain*

4. List courses requested: (*Grades 8 – 12 only [if applicable]*)
 _____ Space Available Full _____ Space Available Full _____ Space Available Full
 _____ Space Available Full _____ Space Available Full _____ Space Available Full
 _____ Space Available Full _____ Space Available Full _____ Space Available Full

Note: Bussing to schools outside the catchment area will only be provided if space is available on regular routes and bussing fees will apply. Please contact Transportation Coordinator for availability at: 250-354-4871 ext # 204

 Signature - Parent/Legal Guardian Date

 Signature - Principal of current catchment School Date

➤ **Please return to out of catchment School for signature prior to forwarding to Board Office**

 Signature - Principal of School requested Date
 Principal or District Staff Comments: **This Student Transfer is PENDING until September 8th. Please have your child attend their Catchment School in September. You will be notified of the decision of your transfer request after September 8th.**

 Signature - Director of Independent Learning Services (*if applicable*)

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|---|--|---------------------------------------|--|--|--|--------------------------|
| Approved <input type="checkbox"/> | | Not approved <input type="checkbox"/> | | Waitlist Until: <u>September 8, 2017</u> | | District Use Only |
| _____ Signature - Superintendent of Schools or Designate | | | | | | |
| Comments: _____ | | | | | | |
| cc: Catchment school, Receiving School Transportation Department Director of Independent Learning Services (<i>if applicable</i>) | | | | | | |
| | | | | | | Revised: April, 2017 |