



2019 – 2020 STUDENT REQUEST FOR TRANSFER FORM

Note: Before completing form, please review Board Policy #410 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: _____

Date & Time received by School: _____ am / pm

1. Reason for request: _____

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 ...

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

Space Available: Yes No

Principal or District Staff Comments: _____

Signature - Director of Independent Learning Services (if applicable)

District Use Only
Approved Not approved Waitlist Until: _____
Note: All late applications will be waitlisted until September 6, 2019
Signature - Superintendent of Schools or Designate
Comments: _____
cc: Catchment School, Receiving School
Transportation Department
Director of Independent Learning Services (if applicable)
Revised: January, 2019