

OUT OF AREA TRANSFER REQUEST

Garrett County Board of Education

Sections I and II must be completed before request can be received by Garrett County Public Schools

I. STUDENT INFORMATION:

Student: _____	Grade: _____
Parent/Guardian: _____	Student's Home School: _____
Mailing Address: _____	<i>(School located in your home district)</i>
Home Phone: _____	Requested School: _____
Work Phone: _____	<i>(School located outside your home district)</i>

II. REASON(S) FOR THE REQUEST:

If a sitter is involved, please complete the following information:

Sitter's Name: _____	Sitter's Phone: _____
Sitter's Home Address: _____	
_____	_____
Parent/Guardian Signature	Date

III. CONFERENCE:

Home School Request has been:

<input type="checkbox"/> Approved	_____	_____
<input type="checkbox"/> Not approved	Principal's Signature (Home School)	Date
Reason for non-approval: _____		

Requested School Request has been:

<input type="checkbox"/> Approved	_____	_____
<input type="checkbox"/> Not approved	Principal's Signature (Requested School)	Date
Reason for non-approval: _____		

IV. TRANSPORTATION DEPARTMENT:

<input type="checkbox"/> Provided by Parent/Guardian	<input type="checkbox"/> Provided by Garrett County Board of Education
Bus: _____	Stop Location: _____

Director of Transportation	Date

V. ACTION (To be completed by Student Services Department):

<i>Your request has been:</i> <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	
Reason for non-approval: _____	

Director of Student Services	Date