

## Madison County School Student Transfer Request Categories

Please read the following instructions **before** completing the Transfer request form.

**The Local School Principal is authorized to approve the following requests under Board Policy 6.1.3. These requests and supporting documentation should be submitted to the principal at the local school.**

**Senior Status** – When a custodial parent moves to another Madison County High School zone after the completion of the student’s junior year AND the student is classified as a senior, the parent may request the student complete their senior year at the school in which they are currently enrolled. Proof of new residence is required and must accompany the transfer request.

**Alternate Enrollment** – When a custodial parent moves from one Madison County School zone to another Madison County School zone during the semester, the parent may request the student finish the semester at the school of current enrollment. Proof of new residence is required and must accompany the transfer request.

**Advanced Enrollment** – When a custodial parent has a building contract, lease, rental agreement, or sales contract with an occupancy date that falls during the school year, the parent may request enrollment as the school zoned for the residence for the semester the occupancy is scheduled to occur. A copy of the appropriate document showing the occupancy date must accompany the transfer request.

The local school principal will review the request and documentation and approve or deny the request for transfer. The Student Services Department will verify and notify the parent of the decision by email or by letter. The transfer request, documentation and notification will be filed in the student’s cumulative record and a copy of each will be kept on file with the Student Services Department.

**The Student Services Department is authorized to approve the following requests under Board Policy 6.1.3. These requests and supporting documentation must be submitted to the Student Services Department by the custodial parent.**

**Custody** – When the person with whom the student is residing has presented the appropriate custodial paperwork, the student may be granted permission to enroll for one semester, school year, or permanently based on the conditions outlined in the court documents.

**Employee’s Child** - When the employee, who is the custodial parent, wishes to request attendance in the feeder pattern of their worksite or when the district level employee, wishes to request attendance in a school zone other than their zone of residence, the student may be granted permission to enroll for the school year. This provision is based on continued employment and is required annually.

**Double Occupancy** – When the custodial parent lives in a home that is owned, rented, or leased by someone other than the parent AND the utility bill is not in the parent’s name, the parent will complete the Student Residency Affidavit AND submit to a home visit from district social work staff to verify residency within the school zone, the student may be granted permission to enroll for one semester or the school year.

The Student Services Department will review the request and documentation and approve or deny the request for transfer. The Student Services Department will notify the parent of the decision by email or by letter. The transfer request, documentation, and notification will be filed in the student’s cumulative record and a copy of each will be maintained in the Student Services Department.

**The Board is authorized to approve the following requests under Board Policy 6.1.3. These requests and supporting documentation must be submitted to the Student Services Department by the custodial parent.**

**Unique Situation** - A unique situation is a situation where a disruption of the family or student involved AND the school or district requires an opinion of the Board to determine the school zone for enrollment/attendance. Custodial parents are to submit the request to the Student Services Department for review and a recommendation to the Board, if warranted. All unique situation requests should include documentation to support the circumstances causing the disruption.

The Student Services Department will notify the parent and the school of the decision of the Board by email or by letter. If the request does not meet the criteria for submission to the Board, the parent will be notified in writing.

**Madison County Schools Student Transfer Request Form**

Student's Last Name (One form per student request)      First Name      Age      Race      Grade  
\_\_\_\_\_

Custodial Parent's Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

School Zoned to Attend Based on Home Address: \_\_\_\_\_ Requested School: \_\_\_\_\_

If you are a Madison County School employee, where do you work? \_\_\_\_\_

I am applying for (check one):    Senior Status \_\_\_\_    Alternate Enrollment \_\_\_\_    Advanced Enrollment \_\_\_\_  
   Custody \_\_\_\_    Employee's Child \_\_\_\_    Unique Situation \_\_\_\_

Why are you making this request? Be specific; attach a statement if necessary; attach supporting documentation – see back of this form for directions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By my signature, I affirm that the information contained in this application is correct, and I understand that false representation of the facts may result in denial of request. I authorize Madison County Board of Education to obtain information concerning my request from any individual who may have knowledge of the circumstances involved.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**LOCAL SCHOOL USE**

Category:    Advanced Enrollment \_\_\_\_    Alternate Enrollment \_\_\_\_    Senior Status \_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved:    Yes \_\_\_\_    No \_\_\_\_    First Term \_\_\_\_    Second Term \_\_\_\_    Full Year \_\_\_\_

Student Services Department Signature: \_\_\_\_\_ Date Verified: \_\_\_\_\_

Custodial Parent notified by: \_\_\_\_ Email or \_\_\_\_ Letter (attach copy of the notification to this request and file the entire packet in the Student's Permanent Record).

**STUDENT SERVICES**

**(Submit the request with documentation to the Student Services Department)**

Category:    Custody \_\_\_\_    Employee's Child \_\_\_\_

Receiving Principal Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Services Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved:    Yes \_\_\_\_    No \_\_\_\_    Verified By: \_\_\_\_\_ Date: \_\_\_\_\_

Custodial Parent notified by: \_\_\_\_ Email or \_\_\_\_ Letter (attach copy of the notification to this request and file the entire packet in the Student's Permanent Record).

**UNIQUE SITUATIONS**

Approved for Recommendation to Board:    Yes \_\_\_\_    No \_\_\_\_    Agenda Date: \_\_\_\_\_

Duration:    First Term \_\_\_\_    Second Term \_\_\_\_    Full Year \_\_\_\_

Custodial Parent notified by: \_\_\_\_ Email or \_\_\_\_ Letter (attach copy of the notification to this request and file the entire packet in the Student's Permanent Record).

Student Services Department Signature: \_\_\_\_\_ Date: \_\_\_\_\_