

**Middlebury Community Schools
Student Transfer Request
For School Year 2018-2019**

Return this form to the Administrative Office:

Attn: Dr. Robby Goodman
56853 Northridge Drive,
Middlebury, IN 46540

PLEASE NOTE:

- TRANSFERS ARE GRANTED FOR ONLY ONE YEAR AT A TIME: **YOU MUST RE-APPLY EACH SCHOOL YEAR**
- THE FIRST DAY 2018-19 TRANSFER REQUESTS WILL BE ACCEPTED IS **FEBRUARY 21, 2018.**
- **THE DEADLINE FOR SUBMITTING 2018-19 TRANSFER REQUESTS IS SEPT. 13, 2018.**
- REQUESTS WILL BE PROCESSED AS SOON AS SUBMITTED.
- REQUESTS RECEIVED AFTER **SEPTEMBER 13, 2018** WILL NOT BE CONSIDERED FOR TRANSFER.
- THERE IS **NO TUITION FEE** TO ATTEND FOR THE 2018-19 SCHOOL YEAR.

TODAY'S DATE: _____

Student Name: _____

Home Address: _____

City: _____ Zip: _____

Birthdate: ____ / ____ / ____ Home Phone Number: _____

Please provide daytime contact information below, in case we need to discuss this transfer request with you:

Parent Name: _____ Phone Number: _____

School student is expected to attend based on your home address: _____

School student now attends (**in the LAST semester of 2017-18**) _____ Grade _____

School student wishes to attend as a transfer student in **2018-19** _____ Grade _____

Does the student have an IEP, or receive special education services? ____ YES ____ NO

Is either parent an employee of Middlebury Community Schools? ____ YES ____ NO

If YES, give name and workplace _____

Reason for requesting transfer: _____

Regarding Transportation: MCS does not provide transportation across school boundaries. Students may be transported on MCS buses from their school to the Boys/Girls Club after school, but **may not utilize bus service to or from anywhere else in the district.** **Kindergarten students are not eligible for Boys and Girls Club attendance.**

I understand that, if approved, this transfer is conditional on my student maintaining satisfactory attendance and behavior.

SIGNATURE OF PARENT/GUARDIAN

DATE