

SCHOOL YEAR 2019/2020

**New Hanover County
Student Support Services
6410 Carolina Beach Rd.
Wilmington, NC 28412
PHONE 251-2929 FAX 254-4100**

REQUEST FOR SCHOOL PLACEMENT AS EMPLOYEE BENEFIT

STUDENT _____
Last First Middle

▶▶ _____ GRADE STUDENT WILL BE IN WHEN ASSIGNMENT TAKES PLACE

STUDENT ID # _____ AGE _____ RACE _____

ASSIGNED SCHOOL _____ 2018/2019 SCHOOL _____

PARENT/GUARDIAN _____
Last First Middle

ADDRESS _____
Street City State Zip

PHONE NUMBER _____
Home Work Other

*****IF RESIDENCE IS OUT OF NEW HANOVER COUNTY, PLEASE ATTACH A RELEASE FROM THE SCHOOL SYSTEM IN WHICH THE PARENT/GUARDIAN RESIDES*****

EMPLOYEE BENEFIT SCHOOL _____

(See File 8130 in the NHCS Policy Manual) I understand by accepting this enrollment that after 10 days there are no transfers back to my currently assigned school during the 2019/2020 school year.

EMPLOYEE'S PLACE

OF EMPLOYMENT _____ **POSITION** _____

(For the purpose of this benefit, an employee is defined as a person who is employed in a full-time position. Benefits for bus drivers will be to those schools for which they will drive for the 2019/2020 school year.)

PLEASE INITIAL THAT YOU HAVE READ THE STATEMENTS BELOW.

_____ I CERTIFY THAT THE INFORMATION ABOVE IS ACCURATE AND THAT I WILL NOTIFY THE PRINCIPAL IMMEDIATELY OF ANY CHANGE OF ADDRESS

_____ I UNDERSTAND THAT IF THIS REQUEST IS APPROVED, IT IS **VALID FOR ONE SCHOOL YEAR ONLY**

_____ I FURTHER UNDERSTAND THAT I AM RESPONSIBLE FOR TRANSPORTATION TO AND FROM SCHOOL IN A TIMELY MANNER

_____ I UNDERSTAND THAT IF TRANSPORTATION BECOMES AN ISSUE, I MAY LOSE MY EMPLOYEE BENEFIT.

_____ IS YOUR CHILD SERVED BY AN IEP (Individual Education Plan)? YES _____ NO _____

RETURN THIS FORM TO THE SCHOOL WHICH YOUR CHILD WILL ATTEND

Principal Review: I have reviewed and verified with Human Resources and/or Transportation the employment status.

PRINCIPAL'S SIGNATURE _____ DATE _____ APPROVED _____ DENIED _____

(Processed) _____ Date _____