



Rankin County
School District

TRADITION OF EXCELLENCE

RANKIN COUNTY SCHOOL DISTRICT IEP STUDENT TRANSFER

Date: _____

Student Name: _____

Student MSIS number: _____

Student DOB: _____

Based on an IEP determination, the above referenced student will be transferring

from _____
School of Residency

to _____
IEP Determined School

Signature of Special Education Director or their designee

Place a copy of this form in the student's cumulative folder.