

CARMEL CLAY SCHOOLS  
Residency/Transfer Request

Updated: 5/27/21



TODAY'S DATE \_\_\_\_\_

**PLEASE CHECK APPROPRIATE BOX**

REQUEST IS FOR THE BEGINNING OF THE \_\_\_\_\_ SCHOOL YEAR (ie: 2022-2023)

REQUEST IS FOR THE REMAINDER OF THE \_\_\_\_\_ SCHOOL YEAR (ie: 2021-2022)

**REASON FOR REQUEST**

Current address is within the Carmel Clay Schools boundaries, but is temporary. We will be moving to a different address within the Carmel Clay Schools boundaries during this school year.

In-District Transfer: I live within the Carmel Clay Schools boundaries & would like to request my child attend a different school within the CCS district.

do not currently live in the Carmel Clay Schools district. I am submitting a **Temporary Non-Resident** request: ***You must attach evidence of intent to establish residence within the school corporation within ninety (90) days to this application.*** The student's first day of attendance will be \_\_\_\_\_

I am a regular Carmel Clay Schools employee & live within the CCS boundaries (proof of residency is not required for employees). If you do not live within the CCS boundaries, please complete the "Non-Resident Employee Enrollment Benefit Application" found on the CCS Staff website: <https://www.ccs.k12.in.us/staff>

Your School/Location (for CCS employees only) \_\_\_\_\_

Position (for CCS employees only) \_\_\_\_\_

STUDENT'S FULL NAME \_\_\_\_\_

STUDENT'S CURRENT GRADE \_\_\_\_\_ STUDENT'S DATE OF BIRTH \_\_\_\_\_

SCHOOL STUDENT IS CURRENTLY ATTENDING (or zoned school) \_\_\_\_\_

STUDENT'S GRADE LEVEL NEXT SCHOOL YEAR \_\_\_\_\_

SCHOOL YOU ARE REQUESTING \_\_\_\_\_

STUDENT'S CURRENT ADDRESS \_\_\_\_\_

WHAT IS THE PROPOSED/NEW ADDRESS (if applicable) \_\_\_\_\_

WHAT IS YOUR ANTICIPATED MOVE-IN DATE TO NEW RESIDENCE (if applicable) \_\_\_\_\_

YOUR NAME \_\_\_\_\_

YOUR E-MAIL ADDRESS \_\_\_\_\_

YOUR PHONE NUMBER \_\_\_\_\_

**\*\*PLEASE NOTE: FOR ALL REQUESTS:**

- 1. *You must provide: a purchase agreement, closing documents, deed, lease agreement, mortgage document, or property tax statement, **AND***
- 2. *Gas or electric utility bill (other utilities not accepted). Provide when established.*

**REQUESTS WILL NOT BE ACCEPTED/CONSIDERED WITHOUT PROPER DOCUMENTATION**

**PLEASE BE AWARE: \*\*DISTRICT TRANSPORTATION WILL NOT BE PROVIDED\*\***

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PLEASE EXPLAIN UNIQUE HARDSHIP/CIRCUMSTANCES (please attach a separate page, if needed)

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

PRINTED NAME \_\_\_\_\_ DATE \_\_\_\_\_  
*Parent or legal guardian*

SIGNATURE \_\_\_\_\_

*\*Please note: The Carmel Clay Schools Student Services Director has the right to revoke/rescind his decision at any time.*

BUILDING PRINCIPAL'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINCIPAL'S COMMENTS/NOTES \_\_\_\_\_

**PRINCIPALS: \*\*PLEASE SEND COMPLETED FORM TO THE DIRECTOR OF STUDENT SERVICES\*\***

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*For office use only:*

APPROVED: \_\_\_\_\_ DATE \_\_\_\_\_

DENIED: \_\_\_\_\_ DATE \_\_\_\_\_

Student will need to attend \_\_\_\_\_

Reason for Denial \_\_\_\_\_