

**GRANVILLE COUNTY PUBLIC SCHOOLS
REQUEST FOR STUDENT TRANSFER INTO
GRANVILLE COUNTY FOR
A CHILD OF A PERMANENT EMPLOYEE
LIVING OUTSIDE OF GRANVILLE COUNTY
2023-2024**

RETURN TO:
Lori A. Ward
Student Information Coordinator

Granville County Public Schools
P. O. Box 927
Oxford, NC 27565

Phone: 919-693-4613

Any application from a parent or legal guardian living outside Granville County requesting their son/daughter to attend a Granville County Public School as a student shall be acted upon by the Board contingent upon the availability of accommodations and facilities, without regard to sex, race, color, or national origin. **Students under suspension or expulsion are not eligible for transfer.** A request to attend Granville County Public Schools from outside the district must be **RENEWED EACH SCHOOL YEAR.** Request for transfer must be received by **June 1, 2023.**

Name of Parent(s) And Or Guardian(s). Address. Phone (Print or Type) _____

Student's Name

(First) (Middle) (Last)

Grade Level: _____ 2023-2024

City _____ State _____ Zip _____ Parent(s) email address: _____

Home Phone _____ Work Phone _____ Cell Phone _____

School Requested _____ County/City of Residence _____

School Parent Assigned to for the 23-24 School Year _____

Reason for Request _____

Is this student receiving special education services?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Did you request this transfer for your child last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a permanent employee of Granville County Public Schools?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

_____ Date _____ Parent/Guardian Signature

To be completed by Superintendent of district in which student resides.

TO SUPERINTENDENT OF RELEASING COUNTY: Please return this form to the parent so that it may be submitted to the Granville County Board of Education.

The _____ Board of Education approves the release of _____ to the Granville County Board of Education for the _____ school year.

Signature of Releasing County Superintendent/Representative _____ Date

FOR OFFICE USE ONLY

Granville County Public Schools Administrative Action

Approved Yes No

The above named student has been accepted for assignment to: _____

Signature _____ Date _____