MEDICINE HAT PUBLIC BOARD OF EDUCATION OPERATES AS MEDICINE HAT PUBLIC SCHOOL DIVISION, AND FOR THE PURPOSE OF THIS DOCUMENT WILL BE REFERRED TO AS "MHPSD" AND/OR "DIVISION"

SECTION 800 – Facilities and Transportation

ADMINISTRATIVE PROCEDURE - EXHIBIT: APPLICATION TO ATTEND A SCHOOL OUTSIDE DESIGNATED ATTENDANCE AREA

EXHIBIT CODE: 802 E 001

Policy Reference: 802 – Registration Process and School Attendance Areas

EXHIBIT

See below for application form.

Approved: May 17, 2005 **Revised:** June 17, 2014

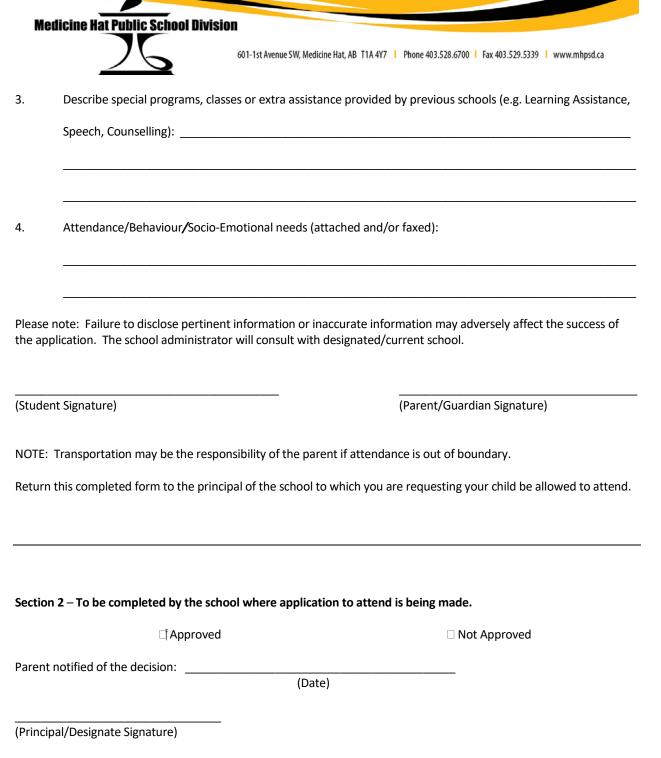


APPLICATION TO ATTEND A SCHOOL OUTSIDE DESIGNATED ATTENDANCE AREA

(To be completed if transfer request occurs after the start of the school year or new semester)

Please read the attached School Division Policy on school attendance areas before completing this form. Student's Name: _____ Grade: _____ Street Address: _____ Postal Code: _____ Student is residing with: Both Parents / Mother / Father / Guardian / Other (please circle) Mother's Name: Father's Name: Home Phone: Home Phone: Work Phone: Work Phone: Cell Phone: Cell Phone: Address: Address: Presently Attending: _____ Attendance Area School: _____ Requesting to Attend: ______ Student will be entering Grade: _____ Have you spoken to the principal of the school where your child is currently enrolled? \Box Yes \Box No Please note: Mid-year transfers require the current principal to be contacted by the parent. Prior school(s) attended: 1. _____ Grade(s): _____ Date last attended: 2. Grade(s): Date last attended: Reason(s) for the requested change (attach letter if insufficient space): 1. 2. Academic History (most current report card preferred):





Copies of completed form to: Student, Parent/Guardian, Receiving School, Designated/Current School, Deputy Superintendent: Human Resources

