



Parents: Please complete this form and mail it to the Superintendent of the Meriwether County School System, P.O. Box 70, Greenville, GA 30222, or you can bring it to our Central Office located at 2100 Gaston St., Greenville. DO NOT return your form to any school. NOTE: The Central Office will be closed on Fridays and from June 29th-July 5th. Requests for transfers will not be accepted after the close of business on July 10, 2015. You will be notified if your transfer request has been approved or denied no later than September 9th, depending on enrollment at your school choice.

Under a 2009 state law (O.C.G.A. § 20-2-2131), parents may request a transfer to another public school within their local school district. Before making your request, please be sure to read the letter that contains all the information related to this request. If you want to request a transfer, please complete the information below.

Parent Transfer Request Form

Student Information

Date _____ Student's Full Name _____

Grade _____ Birth Date _____ Age _____

Name of Custodial Parent or Guardian requesting transfer _____

Address _____
Street City State Zip Code

Phone _____ E-Mail (if available) _____

The Meriwether County School the student is **currently** zoned to attend in 2015-2016:

Name of School in your **current attendance zone**

Parent Request for School Transfer

I _____ am requesting a transfer for _____

Name of Parent/Guardian

Student's Legal Name

to attend one of the following other schools in the district. I fully understand that my child may only receive my first choice of schools if space is available at the time this request is approved by the local school district. **I also understand that I am responsible for transportation, as well as my child arriving to school on time.**

Parent/Guardian Ranked List of Schools for Transfer (where more than one school is available).

1) _____

2) _____

Parent/Guardian Signature

Date