

# GREENFIELD-CENTRAL COMMUNITY SCHOOL CORPORATION

## 2011-2012 Student Transfer Request

Date of Request \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone Number \_\_\_\_\_

Student's Name \_\_\_\_\_

Grade level for 2011-2012 \_\_\_\_\_

School district of Residence \_\_\_\_\_

School requested for 2011-2012 school year \_\_\_\_\_

Reason for transfer: \_\_\_\_\_  
\_\_\_\_\_

<b><u>For Office Use Only</u></b>	
<i>Principal/Designee Approval</i>	<i>Superintendent</i>
_____ <i>Approval</i> _____ <i>Denied</i>	_____ <i>Approval</i> _____ <i>Denied</i>
_____ <i>Principal/Designee Signature</i>	_____ <i>Superintendent Signature</i>
Reason: _____ _____	
_____ <i>Added to Database</i> (Date)	_____ <i>Sent Letter of Receipt</i> (Date)
<b>PLEASE complete this form, have the principal sign at the school of choice and return to the Administration Center. Requests will <u>NOT</u> be reviewed until 2011-12 registration time.</b>	