

No.

Date



**APPLICATION FOR RELEASE FROM
AND FOR ACCEPTANCE TO
20 -20 School Year**

**SCHOOL SYSTEM
SCHOOL SYSTEM**

**Please return completed form to: Kannapolis City Schools
100 Denver Street, Kannapolis, NC 28083
Phone: 704-938-1131 Fax: 704-932-4760**

New
Application

Renewal
Application

	Grade #	
STUDENT NAME		Grade for 20 -20
Date of Birth:	Current Address	
School Serving Parent's Residence:		
Last school attended:	Requested School	
Special educational needs of student (check all that apply):	Academically & Intellectually Gifted	504 Plan
Exceptional Child/IEP	English as a Second Language	Not Applicable Other
List school sports student has participated in during the past 12 months:		
Mother/Legal Guardian: (First, Middle, Last Name)		
Current Address:	Email address:	
Home Phone:	Cell Phone:	Work Phone:
Employer's Name & Address		
Father/Legal Guardian: (First, Middle, Last Name)		
Current Address:	Email address:	
Home Phone:	Cell Phone:	Work Phone:
Employer's Name & Address:		
Is this a New Request? Is this a Renewal Request? In the space that follows, please give your reasons for making this request:		

My child **IS** **IS NOT** under suspension or expulsion at any school. My child **HAS** **HAS NOT** been convicted of a felony. (check one) (check one)

Certification Statement: (Please initial each statement to indicate that you have read and understand the following) I understand:

- The transfer decision is valid only for the current school year.
- I am responsible for on time transportation to and from school.
- I will receive written notification of the transfer decision by mail.
- If this application is incomplete it will be returned and not processed.

My signature certifies that I have completely and accurately answered the information on this application.

(Parent/Legal Guardian Name – Please **Print**)

(**Signature** of Parent/Legal Guardian)

(Date)

Requirements for Transfer Approval: Students whose applications for transfer are approved must adhere to the following stipulations:

- 1) Provide transportation to and from school
- 2) Comply with the district's attendance policy
- 3) Exhibit exemplary conduct
- 4) Maintain the academic average for promotion to the next grade level

A PRINCIPAL CAN RECOMMEND THAT A TRANSFER BE REVOKED IF ANY OF THE STIPULATIONS ARE NOT MET OR IF THE TRANSFER WAS GRANTED UPON FALSE OR MISLEADING INFORMATION.

This release becomes effective when the administrative unit to which this child requests admission, affirms by its Superintendent / Designee that the child will be accepted and enrolled for the entire school term and is approved by the releasing Board of Education. That unit, in approving the release, does not accept any responsibilities for transportation, textbooks, tuition payment, nor any other costs incidental to the child's enrollment in any school outside the administrative unit. **Requests can only be made and granted for one school year at a time.**

Signature of Parent/Guardian

Please Print Name

Date

Recommendation by Administrator: Grant Release Deny Release _____
Signature of Administrator Date

Action by the Board of Education: Grant Release Deny Release _____
Signature of Administrator Date

OR

Recommendation by Administrator: Grant Acceptance Deny Acceptance _____
Signature of Administrator Date

Action by the Board of Education: Grant Acceptance Deny Acceptance _____
Signature of Administrator Date

Early College Transfer Agreement: Grant Acceptance Grant Release _____
Signature of Administrator Date

In compliance with federal law, the Kannapolis City School System administers all educational programs, employment activities and admissions without discrimination because of race, religion, national or ethnic origin, color, age, military service, disability, or gender, except where exemption is appropriate and allowed by law.