

Date _____

Time _____

School _____

Grade _____

Teacher _____

**Clinton City Schools
Transfer Form
Kindergarten - Sixth Grade**

(Please Print)

Student Name: _____

Birth Date: _____ Age: _____ Sex: _____ Grade Level: _____

Home Address: _____

City: _____ County: _____ Zip: _____

Name of Parent/Guardian: _____

Home Phone: _____

Mother Cell: _____ Father Cell: _____

Mother Work: _____ Father Work: _____

If your child is registering for Kindergarten, did they attend an Anderson County or Clinton City Pre-K program? Yes _____ No _____

IMPORTANT – PLEASE READ AND SIGN

- Your child will be enrolled in the school system and in the school requested provided space is available.
- Clinton City Schools shall have the right to deny any transfer request of a student who has a history of inappropriate behavior or poor attendance.
- There will be no obligation for Clinton City Schools to provide transportation.
- A \$25 pre-registration fee must accompany all applications. This one-time registration fee is not refundable.
- Transfers may be revoked for failure to adhere to school expectations and guidelines.

Your signature on this form indicates you understand and agree to the above guidelines.

Parent/Guardian Signature **Date**

List choice of schools in preferential order:

1. _____
2. _____
3. _____

*** School preference is not guaranteed**

Continued on back of page

List full names of any brothers or sisters currently enrolled in Clinton City Schools.

1. _____ Grade _____ School _____
2. _____ Grade _____ School _____
3. _____ Grade _____ School _____

A complete application must include:

1. Completed transfer form (blue)
2. Completed registration form (white)
3. Copy of student's birth certificate
4. Copy of student's social security card
5. Up-to-date immunization record
6. Copy of parent/guardians drivers license
7. Copy of current report card

Kindergarten applications will be accepted without items 5 and 7.

<p>FOR OFFICE USE ONLY</p> <p>Amount of Pre-registration fee: _____</p> <p>Date: _____ Time: _____ Cash: _____ Check: _____</p> <p>Check Number: _____ Amount: _____</p> <p>Person Making Payment: _____</p> <p>Receipt Number: _____ Authorization: _____</p> <p>Reason for denial: _____</p> <p>_____</p> <p>Reason for acceptance: _____</p> <p>_____</p>
