



Transfer Form
New Students
Pre-K – Sixth Grade
Deadline: April 15 – July 15

Office Use Only
Date
Time
School
Grade
Teacher

After this stated deadline, all transfer requests will be put on waiting list until the school year has begun and final membership numbers have been determined.

Student Name: Last First Middle

Date of Birth: Age: Sex: Grade Level:

Home Address:

City: County: Zip:

Name of Parent/Guardian:

Home Phone:

Mother Cell Phone: Father Cell Phone:

Mother Work Phone: Father Work Phone:

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

School Last Attended:

Zoned School:

Reason for Request:

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 attendance concerns.
Clinton City Schools shall have the right to deny any transfer request of a student whose parents exhibit a lack of support for the Clinton City Schools philosophy, School Board Policies, and state and local assessment expectations.
Clinton City Schools does not provide transportation.
A \$25 pre-registration fee must accompany all applications. This one-time registration fee is not refundable.
School preference is not guaranteed.

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

Parent/Guardian Signature

Date

(Continue on back of page)

List choice of schools in preferential order:

1. _____
2. _____
3. _____

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 Student Information Form (white)
3. Copy of student's Birth Certificate
4. Copy of student's Social Security Card
5. Copy of parent/guardian's Driver License
6. Up-to-date Tennessee Immunization Record
7. Copy of current Report Card

**Kindergarten applications will be accepted without items 6 and 7. Item 6 is due by August 1 if transfer request is approved.*

FOR OFFICE USE ONLY			
Date: _____	Time: _____	Cash: _____	Check: _____
Check Number: _____		Amount: _____	
Person Making Payment: _____			
Receipt Number: _____			
Transfer Accepted: _____		Transfer Denied: _____	
Reason for Denial: _____			
Approved By: _____		Date: _____	