

Coffee County School System
400 Reddoch Hill Road
Elba, AL 36323
Phone: 334-897-5016 Fax: 334-897-6207

REQUEST FOR INTERDISTRICT TRANSFER

Date: _____
I would like to request an interdistrict transfer for my child/children to attend _____ school system/school for the **2021-2022** school year. I understand that this approval is for **one year only** and that I must resubmit my request next spring if I wish my child/children to continue enrollment in the requested school system/school.

HAVE YOU SUBMITTED A REQUEST IN PRIOR YEARS? YES NO

NAME OF SCHOOL(S) YOUR CHILD/CHILDREN CURRENTLY ATTEND _____

REASON FOR REQUEST (Please respond within the space provided. Do not attach a letter.)

NAME OF ALL SCHOOL-AGE CHILDREN WITHIN YOUR FAMILY AND THE GRADE HE/SHE WILL BE ENTERING: (Please print legibly)

Student _____ **Grade** _____

Student _____ **Grade** _____

Student _____ **Grade** _____

Student _____ **Grade** _____

SIGNATURE OF PARENT/GUARDIAN (Please sign legibly) _____ **ADDRESS** _____

PHONE NUMBER: _____

**The following documentation is required for all out of zone students seeking enrollment in the Coffee County School System.
Copy of Final Report Card - Official Attendance Report - Discipline Report (signed by the principal) - Standardized Test Scores**

Coffee County Schools does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups.

If your request is approved, this form will be forwarded to the appropriate school. If your request is denied, notification will be made by mail, or the requested school will contact you via phone. Request submitted January-June; please note, notification will not be made prior to the end of June.

FOR OFFICE USE ONLY

REQUEST: _____ **Approved** _____ **Denied** _____

Kevin D. Killingsworth, Superintendent of Education

