HB 251-FORM B (2019-2020)
Hall County School System

Please return this form to Mr. Kevin Bales; 711 Green Street; Gainesville, GA 30501

Please check one:

☐ We have moved and the new residency address is in another Hall County School's attendance zone, and I am requesting for my child to remain at his/her current school.

☐ We have just moved into the Hall County School District, and I am requesting for my child to be enrolled in a school outside of our new school attendance zone. *__Please attach transcript and all educational records to determine available space to meet your child's learning needs.__*

Parent Transfer Request Form (Parents must complete)

Date _____ Student's Name _____

Grade for fall, 2019 _____ Birth Date _____ Age _____

Hall County Student ID: _____

Name of Custodial Parent or Guardian requesting transfer _____

Home Address _____
                  Street   City   State   Zip

Phone _____ E-Mail _____

To which Hall County School is the student zoned to attend in 2019-20? _____
                                                                 Name of School

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Parent Request for School Transfer

I _____ am requesting a transfer for _____
       Name of Parent/Guardian   Student's Legal Name

to attend one of the following schools in the district **_if space is available_**.

Parent/Guardian Ranked List of Schools for Transfer (where more than one school is available).

1st choice) _____ 2nd choice) _____

General Information

- **Two current proofs of residency are required and should be attached to this form.**
- **Transportation is the responsibility of parents/guardians.**
- A student must register in the school zone where he/she lives.
- Approval for one child to enroll out-of-zone is not applicable to other children in the same family.
- In order for transfer enrollment to continue, parents are expected to maintain a collegial relationship with school staff and to support school policies and procedures.
- With approval of Superintendent or his/her designee, principal may request that out-of-zone attendance be terminated based on one or more of the following reasons:
    - Discipline issues
    - Excessive absences, tardies, or late pick-up of student
    - False information is given on the application form or other records
    - Other just cause
- **GHSA**: As governed by the Georgia High School Association (GHSA) By-Laws, a student who has **not yet** established eligibility at a member high school will be eligible to play in varsity competition for the first year of enrollment. If a student transfers to a Hall County School after having established eligibility in 9th grade (or after) by enrolling in another GHSA member school, then he/she will not be eligible to play in varsity competition for a full year. Unless there is a bona fide move, if after having established eligibility, a student then transfers to a different school, then he/she will not be eligible to play in varsity competition for a full year from the date of transfer. *Please see the GHSA guidelines for further information.*

Parent/Guardian: Please sign below and submit this transfer request form to the address listed above.

False Swearing Notice (O.C.G.A. § 16-10-71)
A person to whom a lawful oath or affirmation has been administered or who executes a document knowing that it purports to be an acknowledgment of a lawful oath or affirmation commits the offense of false swearing when, in any matter or thing other than a judicial proceeding, he knowingly and willfully makes a false statement. A person convicted of the offense of false swearing shall be punished by a fine of not more than $1,000.00 or by imprisonment for not less than one nor more than five years, or both.

I have read, understood, and will support the information above. I swear/affirm under penalty of law, that the information given on this form is correct, that the above address is the primary residence where my child and I live, and that I will notify the school of any change in residency status within 5 days of the change.

Parent/Guardian Signature	Date

For

Receiving School/System Use Only

Two proofs of residence verified on: _____ **by:** _____
                                                          (Date verified)   *(Signature of Person Verifying)*

Date Application Received: _____

☐ Approved   ☐ Denied

Superintendent/Designee Signature	Date