



**OUT-OF-COUNTY TRANSFER APPLICATION**

***Request To Attend Cabell County Schools From An Adjacent County***

FOR SCHOOL YEAR: \_\_\_\_\_ CURRENT COUNTY OF RESIDENCE: \_\_\_\_\_

CURRENT SCHOOL ENROLLED IN: \_\_\_\_\_ GRADE: \_\_\_\_\_

CABELL CO SCHOOL PREFERRED TO ATTEND: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ DOB OF STUDENT: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ DOES YOUR CHILD HAVE A(N): SAT \_\_\_ IEP \_\_\_ 504 \_\_\_

DOES YOUR CHILD HAVE A LEVEL 3 OR 4 DISCIPLINARY ACTION ON RECORD WITHIN THIS CURRENT OR PREVIOUS SCHOOL YEAR? YES \_\_\_ NO \_\_\_

REASON FOR TRANSFER: \_\_\_\_\_

*Please note: Before acceptance is awarded to attend Cabell County Schools, the students' juvenile summary will be reviewed from the adjacent county. Acceptance will be determined by the county board of education and may be denied if there is lack of grade level capacity, lack of programs or services due to areas identified by critical need and shortage policy, or if the applicant has a level 3 or 4 disciplinary incident on record for the current/previous school year. The parent/guardian is required to provide transportation for the student. These transfers MUST BE resubmitted every year.*

***By signing this application, you verify that the information provided herein is true and accurate to the best of your knowledge. Your signature also authorizes Cabell County to contact the previous school/county for behavior, attendance, and transcript records.***

\_\_\_\_\_

\_\_\_\_\_

Parent/Guardian Signature

Date

OFFICE USE ONLY	
DATE RECEIVED: _____ APPROVED ___ OR DENIED ___ REASON: LEVEL 3 OR 4 DISCIPLINARY INCIDENT ON RECORD ___, GRADE LEVEL CAPACITY ___, LACK OF STAFFING OR PROGRAMS/SERVICES DUE TO CRITICAL NEED SHORTAGE __	
SIGNATURE OF ATTENDANCE DIRECTOR : _____	DATE: _____
APPEAL: APPROVED ___ DENIED ___ APPEALED TO: _____	
COMMENTS: _____	
PARENT CONTACTED: _____	DATE: _____
CIRCLE ONE: NEW or RETURN ENTERED DATE: _____	