

Application Window: May 2-31, 2022

Please complete all required information and submit to Tammy Pearce or Danise Slayton at the Johnson City Schools Office of Student Services.

**JOHNSON CITY SCHOOLS
APPLICATION FOR TRANSFER
2022-23 School Year**

NAME OF STUDENT _____ GRADE _____

HOME SCHOOL ZONE _____ SCHOOL REQUESTED _____

NAME OF PARENT/GUARDIAN _____ PHONE _____

ADDRESS _____
(street, city, zip code)

REASON FOR REQUEST _____

I acknowledge that I have been advised of my responsibilities under the transfer policy as follows:

1. This application is for the 2022-23 school year only and will not be retained after this year. A new application must be completed each year I wish to be considered.
2. If my child is selected this year, I must file a new application for the next school year for continuing attendance in the requested school as a transfer student. Failure to apply will be considered intent to return to the school in the zone of residence.
3. I understand priority for placement in the elementary school of Johnson City is as follows:

1 st priority	In-zone student
2 nd priority	Transfer students already enrolled & in good standing
3 rd priority	Siblings of enrolled transfer students
4 th priority	New transfer students
5 th priority	Tuition students already enrolled in good standing
6 th priority	New tuition students (includes siblings of present students)
4. I understand I may be forfeiting a space in the home school if this transfer application cannot be honored.
5. I understand no transportation is provided for transfer students.
6. I understand all transfer students must abide by the rules of the receiving school.
7. I understand all transfer students must be approved by the Superintendent of Schools.
8. I have provided proof of residency within Johnson City city limits.

I HAVE READ & UNDERSTAND THE APPLICATION REQUIREMENTS, PRIORITY FOR PLACEMENT, & TRANSFER POLICY.

SIGNATURE OF PARENT/GUARDIAN _____ DATE _____

FOR SCHOOL USE ONLY

DATE OF APPLICATION _____ RECEIVED BY _____

SELECTED FOR CONSIDERATION ON _____

FINAL ACTION BY THE PRINCIPAL:

_____ APPROVED FOR TRANSFER _____ NOT APPROVED FOR TRANSFER

PRINCIPAL'S SIGNATURE _____ DATE _____

NOTIFIED PARENT (METHOD & DATE): _____