

Transfer Student Eligibility Verification
Wa-Nee Community Schools
1300 North Main Street, IN 46550

Form A (1)

Date of Request: _____

School Year: _____

Requesting Enrollment To:

- Nappanee Elementary Wakarusa Elementary Woodview Elementary
 NorthWood Middle School NorthWood High School

Student Information:

Name of student: _____ Date of birth: _____

Parent/Guardian Name(s): _____

Address: _____ Parent email address: _____

City: _____ State: _____ ZIP: _____ Phone: _____

Transferring From:

School name: _____ Current grade level: _____

District name: _____

Principal/counselor of current school: _____

Address of current school: _____

Questions:

1. Do you understand that the student's parent/guardian must provide transportation for the student to and from the school? YES NO
2. Has your student been expelled or suspended from school? YES NO
3. Do other members of your household reside within the district? YES NO
4. Do other members of your household attend a Wa-Nee school? YES NO

I/We, the undersigned, agree to the following terms of transfer enrollment at Wa-Nee Community Schools:

5. I/We agree to provide transportation for my/our child to and from school.
 - a. Transportation may be made available to non-resident transfer students so long as the following conditions are met:
 - i. Space is available on an existing route
 - ii. Pick up/drop off must occur at an existing bus stop
 - iii. Parents/guardians agree that if capacity no longer exists on the route due to residential students, the non-resident transfer student will not be eligible to use school transportation and will be removed from the route
6. I/We agree to pay all book rental charges and course fees.
7. I/We attest that this student's enrollment in Wa-Nee Community Schools is solely for academic reasons, not an athletic or extra-curricular purpose.
8. I/We agree to assist my/our child in maintaining good academic standing. This includes academic performance, attendance, and discipline. I/We understand that student eligibility to remain enrolled in Wa-Nee Community Schools will be reviewed annually.

I/We attest that the above information is true. Any falsification of information will result in denial of transfer enrollment. I/We authorize above student's current school to release to Wa-Nee Community Schools academic, discipline, testing, and attendance records. I/we understand that the information will be used to determine eligibility for transfer per Wa-Nee Community Schools Policy #5111. This request is for academic reasons only.

Signed: _____

Date: _____