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 e-mail 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 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: _____