## Application for In-County Pupil Transfer 2023-2024 school year

For students who live within Roanoke County and are requesting a transfer within Roanoke County Public School System

STUDENTS NAME					DATE OF BIRTH
LAST	FIRST MIDDLE		<u>:</u>		
Is student in Special Education	on or has student ha	ıd an active individualized	educational program (IEP) at any ti	me during the last school y	ear? 🗆 Yes 🗆 No
If yes, in what Special Educat	tion Program?				
SCHOOL WHERE STUDENT IS CURRENTLY ENROLLED		LLED	SCHOOL REQUESTED FOR 2023/24		
SCHOOL WHERE STUDENT CURRENTLY LIVES			CURRENT GRADE LEVEL	2023/24 GRADE LEVEL	STUDENT'S ID #
REC			d by requested school before transfort, 3) most recent report card, and	-	red.
REASON FOR REQUEST (Plea	ase provide a brief e	xplanation):			
Are there siblings already en	rolled in Roanoke C	ounty Public Schools? 🗖 🗅	Yes 🗖 No		
If so, where?					
NAME OF PERSON MAKING	S REQUEST		RELATIONSHIP TO STUDE	INT	
MANIE OF FERSON MARKING REQUEST			☐ Parent (with legal custody)		
HOME ADDRESS			□ Legal guardian		
			□ Other (specify)		
			BEST CONTACT NUMBER	ALTERNAT	IVE CONTACT NUMBER
City	State	Zip			
1) I have read in its ent	tirety and fully unde	rstand the Roanoke Count	rms my understanding of the follow ty School Board Resident and Nonre submitted before transfer request v	sident Policy (7.02).	
PARENT/GUARDIAN SIGNATURE DATE					
				<u>.</u>	

Completed applications must be mailed to: Dr. Rhonda Stegall, Assistant Superintendent of Administration

Roanoke County Schools Attn: Student Transfers 5937 Cove Road Roanoke, VA 24019-2403

Please call Paula Williams at 540-562-3900 ext. 10120 with questions.