## Form a

## Transfer Student Eligibility Verification Baugo Community Schools 29125 County Road 22 West, Elkhart, IN. 46517

Requesting enrollment to:	Date of request:
□□ Jimtown Elementary □□ Jimtown Junior High School	□□ Jimtown Intermediate Elementary □□ Jimtown High School
<u> </u>	
For school year: 20/	
<b>Student information:</b>	
Name of student:	Date of birth:
Parent/Guardian Name(s):	
Email Address:	
Property Address:	
City: State: ZIP:	Phone:
Transferring from:	
School name:	Current grade level:
District name:	Phone number:
Principal/counselor of current school:	
Address of current school:	
Questionnaire:	
Why do you want to transfer your child to Baug Do you have other students currently attending	
Has your student been suspended or expelled fi	rom their current school?
If yes, please explain why?	
I/We attest that the above information is true. Any transfer enrollment. I/We authorize above student's Schools academic, discipline, testing, and attendant will be used to determine eligibility for transfer per also understand that I/we will be responsible for an transfer student if enrollment is granted. This requires Signed:	falsification of information will result in denial of s current school to release to Baugo Community ce records. I/we understand that the information r Baugo Community Schools Policy #5111. I/We by tuition and for transportation of the above lest is for academic reasons only.
Principal Approval:	Date: