

# ST. MARTIN PARISH SCHOOL SYSTEM STUDENT TRANSFER APPLICATION

STUDENT'S NAME (print): \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ RACE: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

TELEPHONE:

Home: \_\_\_\_\_

Cell: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_ HOME ATTENDANCE ZONE SCHOOL: \_\_\_\_\_

PARENT/GUARDIAN'S NAME (please print) \_\_\_\_\_

TYPE OF TRANSFER REQUEST (Check one, complete required information and forward to the administrator listed.)

<b>____ MAJORITY-TO-MINORITY</b> <i>Deadline: May 1, 2019</i>  Forward to: Frederick Wiltz P.O. Box 1000 Breaux Bridge, LA 70517	Requested school: _____ Grade: _____ 2019-20
	Transportation requested: ____ Yes ____ No
	FOR CENTRAL OFFICE USE: ____ PAIRED ____ NON-PAIRED M-TO-M BUS ROUTE: _____

<b>____ SMPSS EMPLOYEE'S CHILD</b>  Forward to: Frederick Wiltz P.O. Box 1000 Breaux Bridge, LA 70517	Requested school: _____ Grade: _____ 2019-20
	Employee based at: _____

<b>____ EXTRAORDINARY CIRCUMSTANCES</b> <i>No deadline</i>  Forward to: Frederick Wiltz P.O. Box 1000 Breaux Bridge, LA 70517	Requested school: _____ Grade: _____ 2019-20
	School attended in 2018-19: _____
	Reason for request to transfer: _____

Additional space if needed

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THUS DONE AND SIGNED by parties hereto on this the \_\_\_\_\_ day of \_\_\_\_\_, in the presence of witnesses set opposite their prospective names.

Witnesses: \_\_\_\_\_ by: \_\_\_\_\_ Parent or Guardian

\_\_\_\_\_  
Notary Public

## CENTRAL OFFICE USE ONLY

APPROVED: \_\_\_\_ YES \_\_\_\_ NO Administrator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_