

Application for Change in School Assignment

Form to be used by resident students requesting assignment to a school outside their attendance area.

Students Name: _____
Last First Middle Initial

Home Address: _____ Phone #: _____

Present School: _____ Present Grade: _____

Requested School: _____ For School Year: _____ Grade: _____

State the reason for requesting this change in assignment: If request is based on hardship, give full details of the hardship.

Are you an employee of the Anderson County Schools? Yes () Location: _____

Parent/Guardian's Signature: _____ Date: _____

By signing this request form, I am stating that I agree to the following:

- The specific details of our situation are covered in the above written statement.
- We acknowledge that if request is granted, transportation will only be provided within attendance areas.

To Be Completed By Authorized Personnel

Date Application Received: _____ Time application Received: _____

Application Received by: _____

Request Approved: _____
Date

Request Disapproved: _____
Date

Superintendent/Designee Signature: _____