

## OUT-OF-AREA REQUEST

(to be used for schools within HRCE only)

Name of School: \_\_\_\_\_

Requested School: \_\_\_\_\_

Date Requested to Start  
Out-of-Area School: \_\_\_\_\_

Student's Current Grade: \_\_\_\_\_

Full Name of Student: \_\_\_\_\_

Names of Parent/Guardian: \_\_\_\_\_

Address (Complete): \_\_\_\_\_

Telephone: \_\_\_\_\_

<b>Reason for Request:</b>	
I/we understand that I/we are responsible to provide transportation for our child and I/we understand the transfer is a permanent one.	
<i>Signature of Parent/Guardian</i>	<i>Date</i>

The school where the placement is requested will complete the section below and you will be contacted when the decision has been made.

<b>Received by school on (date &amp; time):</b>	
<b>Decision of Principal:</b>	
<b>Signature of Principal:</b>	
<b>Parent/Guardian notified on (date):</b>	