



Bertie County Schools

School Transfer Form

(Subject to space availability, date received, and priority order)

***All transfer requests for the following school year must be received during the month of May of the current year**

Parent/Guardian 1 (Last, First, M.I.)	Home Phone: Work Phone	Cell Phone:
Parent/Guardian 2 (Last, First, M.I.)	Home Phone: Work Phone	Cell Phone:
Parent/Guardian Physical Address (No P.O. Box)	City	Zip
Person to contact if other than parent:		
Student Name (Last)	(First)	(Middle)
School Currently Attending or Last Attended	Grade	
Please describe any problem or special need your child(ren) has had, including attendance and suspension. (Example: Medical, attention, behavioral, etc. to determine appropriate placement)		
Reason for Request. (Please include daycare, siblings attending, special programs, etc.). Attach an additional sheet if necessary.	<i>List School Transfer choice(s) in order of Priority</i> 1. _____ 2. _____ 3. _____	

**Tuition will be charged to all students enrolling in Bertie County Schools who reside in another school district*

I hereby verify that the above information is true and correct to the best of my knowledge and belief

_____ _____
Signature-Parent/Guardian **Date**

<i>For Central Office Use Only</i>		
Date Application Received	Date Parent/Guardian Notified	Date of Approval/Denial
Approved	Denied	Signature of Responsible Authority
Approved to attend _____ on _____ at _____. <div style="display: flex; justify-content: space-around;"> School Building Name Starting Date Grade Level </div>		
Reason for Denial (if applicable):		

Office of the Superintendent
715 US Highway 13 North
Windsor, NC 27983
Phone (252)794-6000- Fax (252)794-6071