



# AMBER TRAILS SCHOOL PUNJABI PROGRAM

## SCHOOL REQUEST/TRANSFER FORM

- Choice
- Designated
- Program Change

**Choice** - Seven Oaks School Division residents requesting a school, which is not the catchment school, based on residence and program.

**Designated** - The catchment school could not accommodate further enrolment for the requested program.

**Program Change/Other** - Student is changing programs (language or other) and is transferring to their catchment school. Student is requesting to return to their catchment school.

Please complete and return this form to the **School Principal**. Notification of decisions will be by June 30<sup>th</sup>. Questions should be directed to the Principal at the school OR the Superintendents' Department.

<b>Legal Name of Student:</b>	_____		
	<small>Last Name, Given Names (in full)</small>		
<b>Name of Parent(s)/Guardian(s):</b>	_____		
<b>Address:</b>	_____		_____
	<small>Street</small>		<small>Postal Code</small>
<b>Telephone:</b>	_____		_____
	<small>Home</small>		<small>Work</small>
<b>Date of Birth:</b>	_____	<b>MET #</b>	_____
	<small>Month/Day/Year</small>		

<b>Current School:</b>	_____	_____	_____
		<small>Program</small>	<small>Grade</small>
<b>School Requested:</b>	_____	_____	_____
		<small>Program</small>	<small>Grade</small>
<b>Catchment School:</b>	_____	<b>Date Effective:</b>	_____

<b>Reasons for Request</b> (Additional information may be included on back of this paper):	
_____	
_____	
_____	
_____	_____
<small>Signature of Parent/Guardian</small>	<small>Date</small>

<b>THIS SECTION TO BE COMPLETED BY SCHOOL OFFICE</b>	
<input type="checkbox"/> Request Approved	_____
	<small>Signature of Principal</small>
<input type="checkbox"/> Request Denied	_____
	<small>Date</small>

Copy to: Principals of: Current School, Requested School, Catchment School  
Parent/Guardian  
School Board Office