**CAROLINE COUNTY PUBLIC SCHOOLS**
**Application for Change of Student School Assignment**

Please read the attached ***Regulation: Student School Assignment*** before completing this form. The parent or legal guardian must complete Part I and submit to Mr. Bill Allen, Caroline County Public Schools, 204 Franklin Street, Denton, MD 21629, (410) 479-3253.
***All request forms for the next school year must be submitted no later than June 1. **All requests must be accompanied with a proper proof of residency for the stated physical address in order for your application to be processed.**

**PART I: SCHOOL ASSIGNMENT REQUEST**

**Name of Student:** _____

**Date of Birth:**_____ **Grade in SY 2018/2019:**_____

**School Currently Attending:**_____

**Home School According to Residence:**_____

**Name of Parent/Guardian:**_____

****Physical Address****(with proper proof of address)***:** _____

***Mailing Address****(if different from physical address)***:**_____

**Telephone Number:**_____**(please circle) Home Work Cell Message**

**Requested School:**_____

**Reason for Request**: Please circle the number that applies. Only reasons listed in *Section E. Exemptions* will be considered:

1. **Final Grade**
2. **Move from attendance area**
3. **Move to attendance area** (Attach documentation, i.e., copy of lease, sales contract.)
4. **Program of study** ***(Name of program)***_____
5. **Medical or mental health** (Attach documentation from a physician or mental health provider).
6. **Childcare for an elementary student** (Complete the information requested below):

   **Name of Provider/Agency:** _____

   **Address:** _____**Telephone:** _____

   **Days and time supervision is provided:**_____

   ***Signature of daycare provider*:**_____

7. **Family condition** (Attach explanation and any supporting documentation.)
8. **Pre-K availability (If approved only for Pre-K year, you are expected to transfer to home school).**
9. **Payment of out-of-county or out-of-state tuition (**Payment must accompany request)
10. **Out-of-county or out-of-state tuition waived.**

**Additional explanation (Attach separate sheet if more space is needed)**:_____

_____

_____

**I have received and read the information in *Regulation: Student School Assignments.* I understand that unless otherwise indicated, if this request is approved, transportation is not provided by CCPS. I have also provided the following for proper proof of residency:**

☐ **electric bill** ☐ **gas/oil bill** ☐ **complete lease agreement** ☐ **mortgage statement** ☐ **property tax bill**

**Signature of Parent/Legal Guardian:**_____ **Date:**_____

**PART II: School Assignment Decision**

_____**Approved** ☐ **PreK only** ☐ **Thru grade**_____ _____**Denied (circle all that apply)**

**a. Reason Inconsistent w/ Policy & Regulation** **b. Lack of Appropriate Documentation**

**c. Application Late/No Unforeseen Emergency**

**Signature of Supervisor:**_____ **Date:**_____
(Supervisor will forward this copy of the decision to the parent/legal guardian; retain a photocopy for Pupil Services; and send a photocopy to the home school principal and the assigned school principal.)

**APPEALS: Must be made in writing to the Superintendent of Schools, 204 Franklin Street, Denton, MD 21629 within 10 calendar days of the postmarked date of decision. Attach a copy of this form signed by the Supervisor.**