

Intra-State (Other WV Counties)

Inter-State (Out of State)

Out-of-Zone School Enrollment Request

REGISTRATION STATEMENT MUST ACCOMPANY THIS FORM. DO NOT SUBMIT UNLESS ATTACHED

Student Name _____ Date of Birth _____

Parent(s) or Guardian(s) Name _____

Physical Address _____
No-PO Boxes, RR, Rt. or HC Accepted County/State

Mailing Address _____

Telephone Numbers (Home) _____ (Work) _____ (Cell) _____

School Currently Enrolled In _____ Grade _____

School Requesting to Enroll In _____ Grade _____

Reason for Request: _____

Is your Child Currently Receiving Special Education? Please check yes no

If Yes, Please list the Services _____

Do you presently have a child/children attending Summers County Schools? If so, list name(s), grade level(s), and school(s).

This approval is limited to the student named above and does not extend to other family members. Families having more than one child must make separate application for each member wishing to transfer into Summers County School System. If your son/daughter participates in any secondary activities, then you should contact the West Virginia Secondary Schools Activities Commission at (304) 485-5494 as to how this move may affect his/her eligibility.

If residing in another WV County other than Summers, this request is contingent upon approval by the Board of Education where you reside.

I hereby agree to the conditions of this request and policy for Admission of Students Participating Under Out-of-Zone School Enrollments.

Parent(s) or Guardian(s) Signature

Date Requested