



**Chignecto Central**  
Regional Centre for Education

Submit to your current principal. This application is for transfers from school to school only within CCRCE.

# PRE-PRIMARY TO GRADE 12 STUDENT TRANSFER REQUEST

**PLEASE NOTE: Students that transfer outside of their school area will need to find alternative transportation. CCRCE does not alter or provide additional bus routes for students who have transferred outside of their school area.**

Parent/Guardian or Student (If age 19 or over): \_\_\_\_\_ Phone: \_\_\_\_\_

Civic Address: \_\_\_\_\_

Mailing Address if Different: \_\_\_\_\_

Email: \_\_\_\_\_

## Student for whom transfer is requested

Name of Student: \_\_\_\_\_ Grade: \_\_\_\_\_

School Presently Attending: \_\_\_\_\_

School to Which Transfer is Requested: \_\_\_\_\_

Reason for Transfer Request:  
*(Attach additional information as required)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Start Date of Requested Transfer: \_\_\_\_\_

## In signing this request, I understand:

- A. A transfer request is not guaranteed.
- B. I am responsible for finding alternative transportation.
- C. If approved, a Pre-primary Transfer is for the Pre-primary year only. Each child's home address will determine their home school for Primary Registration the following year.
- D. If approved, a Primary to Grade Twelve transfer will see the "Receiving School" become the student's home school.

Signature of Parent/Guardian or Student (If age 19 or over): \_\_\_\_\_

Date Submitted: \_\_\_\_\_

# FOR OFFICE USE ONLY

## STUDENT TRANSFER REQUEST

Student Name: \_\_\_\_\_

“SENDING” Principal confirms receipt of transfer request with Parent/  
Guardian and forwards to receiving school.

RECEIVED

Sending Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Administrative Notes: \_\_\_\_\_  
\_\_\_\_\_

“RECEIVING” Principal confirms receipt of transfer request with Parent/  
Guardian and forwards to appropriate Family of Schools Supervisor.

RECEIVED

Receiving Principal: \_\_\_\_\_ Date: \_\_\_\_\_

Administrative Notes: \_\_\_\_\_  
\_\_\_\_\_

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### FOR FAMILY OF SCHOOLS OFFICE USE ONLY

Date Received: \_\_\_\_\_

Approved:  YES  NO

Processed by: \_\_\_\_\_  
(Family of Schools Supervisor)

Date: \_\_\_\_\_

Administrative Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

