

Transfer Out Form
Elmwood Park Public Schools

Please print all information.

I, _____ am transferring my son/daughter _____
Parent/Guardian Name Student's Name

From Elmwood Park School (*please select*) High School as of _____
 Middle School Last date of attendance
 Gantner Avenue School
 Gilbert Avenue School
 Sixteenth Avenue School

Reason for Transfer

I have moved from _____ I have moved to _____
Elmwood Park resident address Forwarding address

Other Reason (specify reason) _____

I hereby authorize the release of all school, special services, and health records to my child's new school.

School Name: _____

School Address: _____

City, State, Zip Code: _____

Parent/Guardian Signature

Date