



**COMPLIANCE OFFICE
JEFFERSON PARISH PUBLIC SCHOOL SYSTEM**
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jpschools.org

ISAAC G. JOSEPH
SUPERINTENDENT

GRETCHEN A. WILLIAMS
EXECUTIVE DIRECTOR
COMPLIANCE

**TAG-ALONG
TRANSFER REQUEST for 2016-2017**

Name of Student _____ Grade Entering _____

First Middle Last

Parent/Legal Guardian _____ Phone: (Home) _____ (Cell) _____

Address _____
(NUMBER AND STREET) (APARTMENT NUMBER) (CITY) (ZIP)

Date of Birth _____ Placement _____ Regular Education _____ Special Education Exceptionality: _____

All transfer requests must be signed and may be sent to the Compliance Office via: fax, hand delivery or U.S. Mail. You will be notified of the status of your transfer request via email or U.S. Mail. Please provide your email address below:

_____ e-mail address

Note: Students with an approved Inter-District Transfer may remain at their current school until the terminal, or last grade of the school, but must submit an Inter-District Transfer Form and the Transfer Permission form on a yearly basis.

Name of Parish Currently Residing 2016-2017 JPPSS Attendance Zone School

Name of Requested School (where Parent/Guardian is assigned)

Criteria for Tag-Along Transfers

1. Children of principals, assistant principals, guidance counselors, teachers, coaches and other certified school employees, and classified employees regularly assigned to or employed on a full time basis at a school in grades kindergarten through twelve may attend the regular or comprehensive school in which their parent or guardian is so assigned or employed. With respect to advanced studies academies, such children must meet the admissions standards established for enrollment in a particular advanced studies academy and thereafter comply with such enrollment standards as may be prescribed for continued enrollment.
2. This form must be signed by the parent and the receiving school's principal before being returned to the Compliance Office .
3. A Tag-along Transfer is only valid for the school year in which it is approved. Students seeking a Tag-along Transfer in any subsequent school year must apply on a yearly basis.
4. TRANSPORTATION TO AND FROM SCHOOL SHALL BE THE RESPONSIBILITY OF THE TRANSFERRING STUDENT OR HIS/HER PARENT(S)/LEGAL GUARDIAN(S).

I understand that in the event this transfer request is approved, my child's eligibility to participate in sports may be affected under LHSAA rules. For more information on this matter, please call the JPPSS's Athletics, Health and Physical Education Department at 349-8645.

Parent(s)/Legal Guardian(s) Signature _____ Date Submitted _____

Approved: _____ Denied: _____

Approved: _____ Denied: _____

Principal's Signature Date Compliance Officer/Designee Date