

Petition for In District Transfer of Student Whose Parent is an Employee of Jackson County School District

I hereby request that	, in grade, residing with me in the Jackson
Student Name	-
County School District attending	be given permission to
	County school transferring from)
attend	during the 20 20 school year.
(name of Jackson County school transferring to)	
Reason for the Request	
Printed Name of Parent or Guardian	Signature of Parent or Guardian
School:	Position:
Date:	Work Phone Number:
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Principal	Assistant Superintendent
I, Mr. David Baggett, Superintendent, hereby the information provided by the parent or gua	grant the In District Transfer requested above based on rdian.
Witness my signature this the day of _	, 20
	Superintendent