FRANKLIN COUNTY SCHOOL SYSTEM



"Preparing Students for the Challenges of Tomorrow"

Dr. Ruth O'Dell Superintendent (706) 384-4554 Fax (706) 384-7472

Intra-district Transfer Request Form

Parents must complete this form, mail and postmarked by July 23, 2010 to:

Franklin County Board of Education Attn: Intra-district Transfers 280 Busha Road Carnesville, GA 30521

Home Address: _ Mailing Address: (if different from home) Home Phone:		City City Cell Phone:	State State	ZIP ZIP	
	Street	City			
Home Address: _	Street	City	State	ZIP	
I attana nagandin	g the Franklin County	School District's decision wi	ill be mailed on Au	gust 11, 2010	
Parent/Guardian Signature			Date		
I, the child listed ab	ove to attend the school r	(Name of Parent/Gua requested above. I fully under ilable at the time this request	rdian), am requesting	a transfer for may only	
Zoned School for	2010 – 2011:				
Current School A	ttending:				
			Gr	ade:	
			Gr	ade:	