



## INTRADISTRICT TRANSFER OPTION PARENT NOTIFICATION LETTER

Date: July 1, 2014

Dear Parent/Guardian:

This notification is to inform you that Sumter County Middle School has been identified as a:

Priority School                       Focus School                       Alert Title I School

Under Georgia's Elementary and Secondary Education Act of 1965 (ESEA) Flexibility Waiver that was approved on February 9, 2012; Priority and Focus Title I Schools no longer have to provide Public School Choice under the No Child Left Behind of 2001 (NCLB) but rather have reverted to Georgia's Intradistrict Transfer Option.

The Intradistrict Transfer allows a parent/guardian the option to request a transfer from their child's assigned school to a school of the parent's choice within the school zone/district in which their child resides. **However, the Intradistrict Transfer may be granted to your child only if the school to which the request for transfer has classroom space available after all the assigned students have been enrolled.**

For your convenience, the district's list of schools with available classroom space for the upcoming school year is attached. In order to process your request, you will need to complete and submit the attached "Transfer Request Form." Requests for transfers will not be accepted after the close of business on July 21, 2014.

The Intradistrict Transfer option does not require the district to pay for transportation to the transfer school; therefore, **the school district WILL NOT PAY** for transportation for your child if the Intradistrict Transfer option is granted.

You will be notified in writing of the final decision regarding your transfer request. If the request is granted, notification will include the school your child will attend.

If you have additional questions or concerns, please contact the person listed below:

Name: Ms. Gayla Braziel Title: Director of Federal Programs/Pupil Support Services

Email: gbraziel@sumterschools.org Phone: 229-931-8525

Thank you,

\_\_\_\_\_  
District/School Administrator's Signature



**Georgia Department of Education  
Georgia House Bill 251 (2009) – Public School Choice Transfer  
Public School Choice Framework**

**Sumter County School District  
List of Schools with Space for Public School Choice**

**Elementary School(s) with capacity (by grade):**

Grade	Sumter County Primary School
K	No available classroom space
1	No available classroom space
2	No available classroom space

Grade	Sarah Cobb Elementary School
K	No available classroom space
1	No available classroom space
2	<b>Classroom space available</b>
3	No available classroom space
4	No available classroom space

Grade	Sumter County Elementary School
3	No available classroom space
4	<b>Classroom space available</b>
5	<b>Classroom space available</b>

**Middle School(s):**

Grade	Staley Middle School
5	<b>Classroom space available</b>
6	<b>Classroom space available</b>
7	<b>Classroom space available</b>
8	<b>Classroom space available</b>

**Middle School(s):**

Grade	Sumter County Middle School
6	<b>Classroom space available</b>
7	<b>Classroom space available</b>
8	<b>Classroom space available</b>

**High School(s):**

Grade	Americus-Sumter High School - North and South Campus
9	No choice option available
10	No choice option available
11	No choice option available
12	No choice option available



**House Bill 251 (2009) – Public School Choice Transfer**

**Parent Request for School Transfer**

Under a 2009 state law (O.C.G.A. § 20-2-2131), parents may request a transfer to another public school within their local school district. If you want to request a transfer, please complete the information below.

**Parents: please complete this form and mail it to:**

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Parent Transfer Request Form (Parents Must Complete)**

Student Information:

Date: \_\_\_\_\_ Student's Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

Name of Custodial Parent or Guardian requesting transfer: \_\_\_\_\_

Home Address: \_\_\_\_\_

Street City State Zip

E-Mail (if available): \_\_\_\_\_ Phone: \_\_\_\_\_

The student is currently zoned to attend \_\_\_\_\_ (*school*) in the \_\_\_\_\_ school year.

**Parent Request for School Transfer**

I \_\_\_\_\_ (*parent/guardian*) am requesting a transfer for \_\_\_\_\_ (*student's legal name*) to attend one of the following other schools in the district. I fully understand that my child may only receive my first choice of schools if space is available at the time this request is approved by the local school district.

**Parent/Guardian Ranked List of Schools for Transfer (where more than one school is available).**

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_