

JUBILEE CHRISTIAN ACADEMY

INTENT TO TRANSFER FORM

(file in duplicate)

Date filed: _____

School Year: _____

Name: _____

Grade & Section: _____

School to transfer to: _____

Location: _____

Application for: Transfer to another school Leave of Absence

Reason(s) for Transfer <i>(Please check all applicable boxes and provide additional details where necessary.)</i>	
<input type="checkbox"/> FAMILY-RELATED CONCERNS <input type="checkbox"/> Personal Concerns _____ <input type="checkbox"/> Change of Residence _____ <input type="checkbox"/> Desire to be with siblings. Please indicate where the sibling is currently studying: _____ _____	<input type="checkbox"/> SCHOOL EXPERIENCE/ENVIRONMENT <input type="checkbox"/> Learning environment (e.g., Class Size) <input type="checkbox"/> School Rules and Policies <input type="checkbox"/> Student Experience (e.g., Social Adjustment / Extra-curricular) <input type="checkbox"/> Others: _____
<input type="checkbox"/> SECURITY/HEALTH CONCERNS <input type="checkbox"/> Security or Safety Concerns <input type="checkbox"/> Health Reasons (Medical/Socio-emotional/IDevelopmental): _____	<input type="checkbox"/> FINANCIAL REASON <input type="checkbox"/> School Fees Have you been introduced to our Scholarship Program? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you open to being contacted about scholarship opportunities? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> IMMIGRATION (Moving Abroad) Destination Country: _____	
<input type="checkbox"/> ACADEMIC REASONS <input type="checkbox"/> Seeking a different academic program or specialization Preferred SHS Program/strand/offering _____ <input type="checkbox"/> Discontinuation of Chinese Curriculum <input type="checkbox"/> Dissatisfaction with Teaching Approach and/or Faculty <input type="checkbox"/> Dissatisfaction with the curriculum <input type="checkbox"/> Transition to Homeschooling Would you like to consider JCA Homeschool? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> SCHOOL RECOMMENDATION Advised to transfer due to <input type="checkbox"/> 2nd retention in the department <input type="checkbox"/> 2nd year of failure in Chinese in the department <input type="checkbox"/> Failure to meet Academic / Disciplinary Probation <input type="checkbox"/> 2 or more /C-/ Department ratings in one school year) <input type="checkbox"/> Dropped
<input type="checkbox"/> Other Reasons: <i>Please specify:</i> _____	

Parent / Guardian Acknowledgment

I/We understand that this intent to transfer has been communicated to the school, and all information provided is true and correct to the best of our knowledge.

Signature of Parent / Guardian Over Printed Name

Date

Approved / Disapproved by: _____
 Department Principal / Date

FOR SCHOOL USE ONLY

CLEARANCE STATUS:

_____ Department

_____ Guidance

_____ Clinic

_____ TAF

_____ PAGES

_____ Library Clearance

_____ Registrar

The student has been cleared of all obligations. Processing and release of official records is hereby authorized.

Registrar : _____

Date: _____