

Transfer Request for Unique Setting High School

This form is only for requests to transfer to one of the following unique settings high schools:

- Alternative High School
- Discovering Choices
- Jack James High School
- Louise Dean School
- CBe-learn

Instructions

- 1 | Go to the school website for information about the requested school and its transfer process and requirements. Some schools require additional forms. Follow the directions provided on the school website.
 - Alternative High School: <u>https://school.cbe.ab.ca/school/alternative</u>
 - Discovering Choices: https://school.cbe.ab.ca/school/discoveringchoices
 - Jack James High School: <u>https://school.cbe.ab.ca/school/JackJames</u>
 - Louise Dean School: <u>https://school.cbe.ab.ca/school/louisedean</u>
 - CBe-learn: <u>https://school.cbe.ab.ca/school/cbe-learn</u> (use this form only for requests from March 15 - September 30)
- 2 | The parent / legal guardian or independent student must fill out Page 2 of this form.
- 3 Submit this form, plus any other forms required by the unique setting high school, to your designated high school.

Note: CBE will respond to your transfer request through email.

Questions | Please contact your designated high school.



Transfer Request for Unique Setting High School

This form is only for transfer requests to Alternative High School, Discovering Choices, Jack James High School, Louise Dean School or CBe-learn. To be completed by the Parent / Legal Guardian or Independent Student.

Student First Name:	Middle Initial:	Last Name:			CBE Student	ID #:	Date of Birth: (YYYY/MM/DD)		
Student Address: (with Postal Code)							i	Special Education Coding:	
Current School:					Current Grade:		Designated School:		
Requested School: Alternative High Jack James Discovering Choices Louise Dean CBe-learn									
Reason for Transfer Request:								Requested Grade:	
Subjects Desired at Requested School:									
Parent / Legal Guardian or Independent Student Name: Ad					dress (if different from student):				
Home Phone:	Business Phone:		Cell Phone:		Email /	ail Address:			
I, as the Parent / Legal Guardian or Independent Student acknowledge that:									
I have reviewed the transfer information on my requested school's website; and									
This request will not necessarily result in the student's transfer to the requested school; and									
The request will be considered with regard to enrolment priorities set out under the <i>Education Act</i> and the policies of The Calgary Board of Education.									
Note: If the student is an "independent student" as defined in the <i>Education Act</i> , the student's residency will be considered.									
I, the undersigned, hereby represent and have the legal authority to request a transfer for the child. By submitting this form, I declare the information that I have provided is complete and accurate.									
Signature									
For printed form submissions:				For digital form submissions:					
Sign your name below.				If this is a digital form that you will submit through email, type your name below. This acts as your signature.					
				Name:					
Date: (YYYY/MM/DD)				Date: (YYYY/MM/DD)					
Authorization for Collection of Personal Information									

Personal information contained on this form is collected under the Student Record Regulation of the *Education Act*, and section 33(c) of the *Freedom of Information and Protection of Privacy Act*. The information will be used for the purpose of student registration. If you have any questions regarding the collection of this information, contact the school Principal.