Halton District School Board

Application for Grade 8 into Grade 9
Out of Area Transfer Request

Personal information is collected on this form in compliance with the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M56, and is collected under the authority of the Education Act, R.S.O. 1990, c. E.2.
Personal information will be used for purposes related to the regular operational requirements of the educational and administrative functions of the Halton District School Board
For additional information about how the HDSB uses personal information please see the HDSB Statement of Personal Information Practices or, contact your school Principal.

It is a general expectation that students attend the secondary school designated for their attendance area for their Grade 9 year.

Application form is to be returned to the home secondary school by the parent/guardian or student prior to the second Friday in January.

If the request is granted, it is understood that the Board will not provide transportation for the student.

Student I.D. # _____ **French Immersion:** ☐ Yes ☐ No

Student's Name: _____ Application Date: _____
Given Names Surname Day Month Year

Student's Address: _____ Telephone (____) _____
Street Town/City Postal Code Area Code

Birth Date: _____ Parent/Guardian Email: _____
DAY / MONTH / YEAR

Designated Home Secondary School: _____

Present Elementary School: _____

Requested Secondary School: _____

☐ Open ☐ Closed If granted, placement to commence: _____

Reason for Request:

_____ _____
Name of Parent/Guardian (please print) Signature of Parent/Guardian

Date / Time Received: _____ _____
Signature of Home School Principal

To be completed by the Requested School (Attach Appendix B to Parent/Guardian copy of decision)

Date Received: _____ ☐ Approved ☐ Not Approved

Complete one:

A. Student has been accepted at _____ in _____.
Name of School Program/Year/Grade

Special Conditions: _____

B. Student has not been accepted because: _____

Signature of Requested School Principal _____