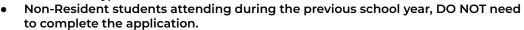
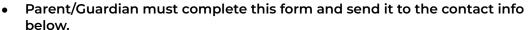
Non-Resident Transfer Application









Student Information:	
Student Name	Grade Level Requesting to Enter
Parent/Guardian Informat	ion:
Parent/Guardian informat	<u>1011.</u>
Parent/Guardian Name:	Parent/Guardian Phone
Mailing Address:	
	Street Address, City, State, Zip
Home Address (if different)	
	Street Address, City, State, Zip
Transferring School Inforn	nation:
Last School Name:	Last Semester Enrolled:
School's Mailing Address:	
	Street Address, City, State, Zip
School's Telephone Number:	
School Corporation:	
Parent/Guardian must complete a send the official documents to the	records request from the current school and have the current school contact info below.
Official documents needed: • Grade History/Transcript, A	ttendance records, Test Scores, Suspension and Expulsion records.
	understand board policy #3110, transfer students, and I agree to abide tion, I understand that I am responsible for all transportation.
Date	Parent/Guardian Signature:
Send Application and Records to:	Mill Creek Community School Corporation 6631 S. County Road 200 W. Clayton, IN 46118

Or fax to: 844-303-1811 or email lnew@mccsc.k12.in.us Attention: Mr. Jim Diagostino, Superintendent