

Jefferson County Schools

Student Transfer of Records Checklist

The appropriate department should initial when student has cleared their department.

Student's Name: _____ Date: _____

Transferring to: _____, _____, _____
(School Name) (City) (State)

_____ Attendance Record Printout Included

_____ Counselor's Information Included of NA

_____ Additional Services Documentation Included or NA

_____ Cleared Classroom Teacher

_____ Copy of Current Report Card Included

_____ Cleared Cafeteria

_____ Cleared Library

_____ Cleared School Office

Final Clearance Approved by Principal

Date Cleared: _____

(Principal's signature)