

Rochelle Elementary Schools #231

Todd Prusator, Superintendent
District Office
444 North 8th Street
Rochelle, Illinois 61068
Phone 815 562-6363

SCHOOL CHOICE REQUEST FORM

If you are requesting a transfer, please complete this form and return it to Rochelle Elementary Schools District Office, 444 North 8th Street, Rochelle, IL 61068 by July 31, 2009. If you have questions about this form or about the public school choice option, contact Todd Prusator, Superintendent or Joanna Sharp, Director of Instructional Services at 1 815 562-6363. If you are not requesting a transfer, you do not need to complete or return this form.

Please list the names of the student(s) attending Lincoln School whom you wish to be transferred and list the name of the school to which you want the student(s) transferred. List Schools in order of preference. (Example 1 Central 2 May 3 Tilton). You will be contacted on the status of your request and reserve the right to deny a transfer if you desire.

Student Name	Grade Level	School Transferred To
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

_____ Yes, my child(ren) will need transportation to the new school.

_____ My child(ren) will not need transportation to the new school.

Parent/Guardian Name _____

Parent/Guardian Address _____

Parent/Guardian Phone Number _____

Parent/Guardian Signature