



Administration Office • 13485 Cumberland Road • Fishers, IN 46038

Ph: 317.594.4100 • FAX: 317.594.4109 • Web site: www.hse.k12.in.us

TRANSFER APPEAL APPLICATION—MULTIPLE STUDENT ADDENDEUM

Please complete this form if you have multiple students within the family requesting transfers and submit with transfer appeal documents.

Student Name: _____ Current Grade: _____

Current School: _____ Does Student have an IEP? Check Yes / No Yes No

New Home School Assignment _____ Approximate Closing or Move-in Date: _____

School Requesting to Attend: _____ For Grade/School Year: _____

Student Name: _____ Current Grade: _____

Current School: _____ Does Student have an IEP? Check Yes / No Yes No

New Home School Assignment _____ Approximate Closing or Move-in Date: _____

School Requesting to Attend: _____ For Grade/School Year: _____

Student Name: _____ Current Grade: _____

Current School: _____ Does Student have an IEP? Check Yes / No Yes No

New Home School Assignment _____ Approximate Closing or Move-in Date: _____

School Requesting to Attend: _____ For Grade/School Year: _____

Student Name: _____ Current Grade: _____

Current School: _____ Does Student have an IEP? Check Yes / No Yes No

New Home School Assignment _____ Approximate Closing or Move-in Date: _____

School Requesting to Attend: _____ For Grade/School Year: _____