

Student Move Notification Form

Student Name: _____ Parent/Guardian Name(s): _____
Relationship: Father

Birthdate: / / State ID Number: _____

Special Education: Yes Disability: _____

Date Student Left Sending School District: / /

Any Pertinent Information:

- Current Standing
 - Traditional School
 - Alternative School
 - Expelled Status
 - Credit Deficient Credits of Attempted
- Court Involvement/Juvenile Justice Contact
- Attendance History
- Transcript (Secondary Only) Attached Yes No

Contact Person in Sending School District: _____ Contact Number: _____

- Bellevue School District, attn: _____
- Bennington School District, attn: Dr. Terry Haack, FAX: 236-2185
- Elkhorn Schools, attn: Mr. Steve Baker, FAX: _____
- Gretna Public School District, attn: _____
- Millard School District, attn: Dr. Kraig Loftquist, FAX: _____
- Omaha Public Schools, attn: Dr. Wesley J. Galusha, FAX: 557-2715
- Papillion School District, attn: Dr. Brad Connor, FAX: _____
- Ralston Public School District, attn: Steve Snodgrass, FAX: _____
- Westside Community School District, Dr. Susan Evanich, FAX: 390-2120