



DEPARTMENT OF
EDUCATION SERVICES
CAYMAN ISLANDS GOVERNMENT

DES Official
Stamp Here

FOR OFFICIAL USE ONLY

SCHO: _____

YEAR: _____

UPN #: _____

Student Transfer Request Form

Important Information

School transfers will be based on capacity, legal address and what is in the best interest of the child (Education Law 2016 Revision). Additionally, all transfers must comply with all other DES policies including those relating to student attendance, academic standards and class size. Failure to supply accurate information could cause your request to be denied. In the event that the application for a transfer is denied, you may request a review of the decision in writing.

If there is another child in the family for whom a transfer request is being request, kindly fill out a form for **each** child.

All requests for transfers require school leaders (SL) and families to meet and review the request and provide all supporting documentation requested when a transfer is warranted, space permitting. School Leaders of the sending school should review transfer checklist and forward student's records within 5-10 working days, once a copy of the approved transfer has been received. Where a student has been identified as "AT RISK" the school leader or Special Education Needs Coordinator (SENCO) must convene a case conference as part of the transfer process

Section 1

Student's Information

Last Name:	First Name :	Middle Name:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth: (dd/mm/yy)	Previous Address & House Number:		District:
New Address & House Number (if applicable):			District:
School Currently Enrolled	Grade		
School Requesting Transfer To	Date for Transfer		

Section 2

Primary Parent/Guardian

Last Name:	First Name:	Relationship to student:	
House Number & Street Address:		District:	PO Box: Post Code:
Cellular:	Work Phone:	Ext.	Home Phone: Email:

Section 2.1

Secondary Parent/Guardian

Last Name:	First Name:	Relationship to student:	
House Number & Street Address:		District:	PO Box: Post Code:
Cellular:	Work Phone:	Ext.	Home Phone: Email:

Section 3

Parental Responsibility/Legal Custody

Is there a court order in effect? Yes No

If yes, who is the court order against? Mother Father Other

Please provide a copy of court order dated within the last sixty (60) days.

Section 4

Reason for Transfer Request (Proof Required)

- I am making this request due to a change of residence.
- I am making this request due to an education, safety or health condition affecting my child.
- Other (Attach written statement)



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Section 5 Information Verification Statement

I, _____ (print name) declare that I am the **only** parent with parental responsibility/legal custody to sign off on this official document for the reason/s below:

- Mother/Father deceased (Provide Death Certificate) Father not listed on Birth Certificate.
 Mother/Father does not have parental responsibility/legal custody (Provide supporting Court Documents)
 Mother/Father is not/does not live on Island (Provide notarized letter of consent from Secondary Parent)
 Not Applicable/Does Not Apply

Section 5.5 Declaration

The residency and custodial information provided for the student on this application is true, accurate and complete as of this date. I understand that **falsification** of an address, custodial information, or the use of any other **fraudulent** means to achieve student transfer or school assignment will be cause for **immediate revocation** and/or **provisional transfer** of the student at the school serving the home number and street address catchment area subject to the applicable laws and policies.

Signature of Legal Parents/Guardians

Date

Primary Parent/Guardian: **Print Name**

Primary Parent/Guardian: **Signature**

Secondary Parent/Guardian: **Print Name**

Secondary Parent/Guardian: **Signature**

Section 6 FOR OFFICIAL USE ONLY – To be completed by DES personnel

The documents listed below are required for transfer within the Cayman Islands Government Schools

- Two (2) proofs** of Address in school catchment (See Residency Verification Guidelines).
 Copy of Parents/Guardians photo ID (Passport **OR** Driver's Licence)
 Any additional supporting documents; i.e Court Documents, Police Report, Incident Report
 Checked and verified physical address/block registration section
 Supporting documentation has been verified and attached for processing by DES personnel.
 Appropriate educational programmes or services are available at the school requested.

Decision based on Review/Evidence Provided

- Approved requested Denied Space is available Space is NOT available in the grade level at the school

Transfer School:

N/A JGHS CHHS SJACPS GTPS RBPS PPS SPS BTPS
 EMPS LHS AEC CIFEC LSHS CPS SBPS WEPS LCES

Grade/Year:

Signature of DES Personnel

Date

RATSO Officer: Print Name

RATSO Officer: Signature

SSIO: Print Name

SSIO: Signature

Section 7 Additional Comments

CC: DES Records Officer School Leader of Sending School School Leader of Receiving School