



**VIRGINIA BEACH CITY PUBLIC SCHOOLS**  
CHARTING THE COURSE

**2018-2019 STUDENT PLACEMENT REQUEST FORM FOR HIGH SCHOOL (GRADES 9-12)**

Please complete form and submit to the Office of Student Leadership with verification of residence (ex: current copy of electric, gas or water utility bill) and all required supporting documentation (as outlined beside reason for request).

Application Type: New  Renewal

Student: \_\_\_\_\_ DOB: \_\_\_\_\_  
Last Name First Name MI

Parent/Guardian: \_\_\_\_\_

Street Address: \_\_\_\_\_, Virginia Beach, VA, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Requested School: \_\_\_\_\_

School Serving Area of Residence: \_\_\_\_\_

School of Current Attendance: \_\_\_\_\_

Grade Level (for school year of request): 9  10  11  12

Special Programs/Services: 504 Plan  Special Education  Other: \_\_\_\_\_

Virginia High School League (VHSL) Activity/Activities: \_\_\_\_\_

**Reason(s) for Request:**

- Child of a VBCPS Employee Primarily Assigned to Requested School**  
Include verification of current employment (ex: copy of current pay stub or bus route reflecting requested school).
- Completion of Senior Year at School Previously Assigned in Junior Year**
- Course/Program Not Available in Zoned School—Name of Course:** \_\_\_\_\_
- Extenuating Circumstances**  
Include documentation showing educational reasons, exceptional hardship or other extenuating circumstances, along with a detailed explanation.
- Medical/Psychological Reasons**  
Include *Medical-Physical Psychological Social Adjustment Reasons Form*, completed by a licensed professional.
- Residence Change during School Year of Request (Not applicable for moves during the summer or previous years.)**  
Include complete housing contract or complete lease agreement as verification of residence change.
- Victim of a Crime**  
Include police report(s) and/or school incident report(s).

**Additional Description/Explanation of Above Reason(s) for Request:**

**Parent/Guardian Placement Agreement:**

I understand that if this placement request is approved:

1. Transportation will not be provided by the school division and is the responsibility of the parent/guardian or adult student.
2. Enrollment may be revoked for poor grades, low attendance, excessive tardiness, disruptive or uncooperative behavior on the part of the student and/or parent/guardian, overcrowding, or other factors.
3. Approval does not constitute a permanent transfer and an application must be submitted for approval yearly.
4. This permission has to do only with registration for classes.

*Any student who transfers from one school to another within the city, without a corresponding change of address, will be ineligible to participate in any VHSL activity for a period of one calendar year from the date of enrollment. For extenuating circumstances, the normal VHSL appeal process may be utilized.*

**I certify that all of the information on this application form is correct to the best of my knowledge and belief, and I understand the placement agreements as listed above.**

\_\_\_\_\_  
Signature of Parent/Guardian or Adult Student

\_\_\_\_\_  
Date

**Submit with verification of residence (ex: current copy of electric, gas or water utility bill) and all required supporting documentation (as outlined beside reason for request) to:**

**Office of Student Leadership  
ATTN: Coordinator of Student Conduct/Services  
1413 Laskin Road  
Virginia Beach, VA 23451**

**OR**

**Fax to 757-263-2022.**

**Allow two weeks for processing. Requests submitted in June or July will be processed by September 1.**

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**FOR OFFICE USE ONLY**

**Coordinator's Decision**

<u>Approved</u>	<u>Disapproved</u>
<input type="checkbox"/> Child of a VBCPS Employee	<input type="checkbox"/> Administrative Reasons (attendance, discipline and/or grades)
<input type="checkbox"/> Completion of Senior Year	<input type="checkbox"/> Insufficient Documentation Provided
<input type="checkbox"/> Course/Program Not Available in Zoned School Course: _____	<input type="checkbox"/> Move Made Outside of Current School Year
<input type="checkbox"/> Extenuating Circumstances	<input type="checkbox"/> Proof of Residence Not Provided
<input type="checkbox"/> Medical/Psychological Reasons	<input type="checkbox"/> Space Not Available in Requested Course
<input type="checkbox"/> Residence Change	<input type="checkbox"/> Request Does Not Meet Criteria
<input type="checkbox"/> Victim of a Crime	<input type="checkbox"/> Requested School Exceeds Capacity by 10% or More

Coordinator's Notes (as applicable): \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Coordinator

\_\_\_\_\_  
Date