

MINISTRY OF EDUCATION, HRD & LABOUR - ST. LUCIA TRANSFER REQUEST & PLACEMENT FORM

PLEASE RETURN THE COMPLETED FORM AND RELEVANT DOCUMENTS TO:

Registrar of Examinations Ministry of Education, HRD and Labour 3 rd Floor, Francis Compton Building Waterfront, CASTRIES

1.	Name of Child	••••••		
2.	Date of Birth		f Required)	
3.	Home Address			
4.	Primary School Attended			
5.	Present/Last School	Form/Grade		
6.	Name of Parent/Guardian			
7.	Nationality of Parent/Guardian	(Proof Required)		
8.	Mailing Address			
9.	TelephoneFax number			
10.	Type of Reguest: Transfer	Placement		
12.	Reason for Transfer: Medical Change of Residence Physical Disability	Transpo	ortation ip Case	
	Give details			
13.	School Choice(s)			
	Signature of Parent/Guardian		Date	
Releve	FOR OFFICIAL USE ONLY			
A.	Latest academic records (original or certified)	$Y_{\mathbf{e}s}$	No	
B.	Birth certificate or other legal documents to ascertain age	Y_{es}	No	
C.	Character reference from last school	$Y_{\mathbf{e}s}$	No	
D.	Work permit certificate of parent/guardian	Y_{es}	No	
E.	Legal document to verify guardianship	Yes	No	
	emic records of students coming from overseas may be faxed of trar – fax no. 758 453 6284	lirectly to t	he office of the	
Receiv	ving Officer: Date Receive	ed		
Decisi	ion Taken:			