

Reminder: The Last Day for Reassignment Requests for the 2023-2024 School Year Is March 31, 2023
2023-2024 REASSIGNMENT GUIDELINES AND POLICIES

All students in Craven County shall attend school in the attendance district in which the parents, legal guardian or court appointed custodian are domiciled. Students may be reassigned to another school outside their domiciled attendance area according to the provisions of the Student Reassignment Policy and Regulation (CCS Policy 4150.00). The following guidelines are to be followed:

1. The request must be made in writing, using a reassignment form. The forms are available at any school, on the Craven County Schools website, or at the Central Office for the Craven County Board of Education. **Each student's information should be on a separate form**, with each form fully filled out and signed by the parent, legal guardian, or court appointed custodian. The forms may be returned to the school you are requesting or at the Central Office for the Craven County Board of Education.
2. The request **must state your reason** as to why you are requesting a school outside of your district. Please note: reassignments are not granted for athletic purposes.
3. Reassignments that are approved are for one school year only. **Parents are committing for their child to attend the approved school for the full school year**. If, during the school year, the parent requests to re-enroll their child in the home district school, a new form for reassignment must be processed, and approval will be based on class size, and extenuating circumstances.
4. **Transportation shall be the responsibility of the parent for out of district reassignments that are approved.**
5. **Students and parents must abide by all the rules and regulations of the school**, including, but not limited to, strict adherence to all arrival and departure times. Students must be in good standing from previous school. Principals may request to the Superintendent that the student be re-enrolled in their home district school if disciplinary, attendance and tardy guidelines are not met.
6. If the request for reassignment is for an extreme medical hardship, (concerning either parent or child) the parent, legal guardian, or court appointed custodian must ATTACH MEDICAL DOCUMENTATION SUBSTANTIATING SUCH A REQUEST. A detailed doctor's statement indicating the specific needs of the child should also be attached. All student information is kept in strict confidentiality according to the Family Educational Rights and Privacy Act (FERPA).
7. Requests are processed on a first-come first-served basis. Notifications of acceptance or denial will be received via email if available or in the mail. **Under no circumstances should acceptance be assumed until the formal letter from the Superintendent's office is received by the parent/legal guardian. Total student numbers (class size) at any given school may cause a delay in assignment decisions in order to accommodate students domiciled within the given school district.**
8. If a request is denied, and the parent feels there are extenuating circumstances that should be considered, a written request for appeal should be submitted to the Superintendent. According to NC GS 115C-369, **the appeal must be made within five days of receipt of the notice of denial.**
9. If the Superintendent denies the application, the parent(s), legal guardian(s), or court appointed custodian(s) may appeal the decision in writing to the Craven County Board of Education through the Superintendent. The appeal must be made within five days of receipt of the notice of denial.
10. **If you reside in another county** other than Craven County, **you must provide to Craven County Schools** a release letter from the county you reside in. Students will not be assigned to Craven County Schools without the release letter. A tuition fee determined by our Board must be paid in full before the first day of school.

Parent, legal guardian or court appointed custodian must be prepared to provide the following information when enrolling a child at any school in Craven County:

- **Child's certified birth certificate** (for Kindergarten, students must turn 5 on or before August 31, 2023).
- **Child's immunization records**
- **Child's health assessments**
- **Custody documentation (if applicable)**
- **Proof of residence (Picture Identification plus one or more of the following):**
 1. **Current lease agreement or home contract**
 2. **Current utility bill****(Either document must be in parent's, legal guardian's or court appointed custodian's name)**

Please return reassignment form by mail or at the Central Office at the below address:

**Craven County Board of Education
Central Services (Attention: Student Services)
3600 Trent Road
New Bern, N.C. 28562**

Craven County Schools Request for School Reassignment 2023-2024 SCHOOL YEAR Please use a separate form for each child, and <u>PRINT CLEARLY.</u>		Date Received at District Office <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">1. Application Date:</div> <div style="width: 45%;">2. School Requested:</div> </div>	
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3. STUDENT'S NAME:	(First)	(Last)	4. GRADE FOR 2023-2024 _____
5. STUDENT LIVES AT THIS ADDRESS:	(Number and Street) _____ (City) _____ IS THIS A NEW ADDRESS YES <input type="checkbox"/> NO <input type="checkbox"/>		6. Date of Birth: ____/____/____ Male ____ Female ____
7. STUDENT'S HOME SCHOOL DISTRICT _____ <small>(Will NOT be the same as school being requested unless special circumstances are noted)</small>		9. This student <input type="checkbox"/> Currently Attends (or) <input type="checkbox"/> Most Recently Attended _____ School	10. How long has this student attended school noted in #9? _____
8. STUDENT LIVES WITH THE FOLLOWING ADULTS AT THE ABOVE ADDRESS: _____ MOTHER (Name) _____ FATHER (Name) _____ OTHER (Name) _____ If OTHER, Please explain: _____			11. Previous Grade (2022-2023) _____
12. This student has an IEP (Individualized Education Plan) <div style="text-align: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></div>			

13. If Student does NOT live with <u>both</u> Mother and Father (as listed on birth certificate) at the above address, you must provide information about parents: _____ (Please circle below the appropriate that applies)			
FATHER: Legal Guardian Court Appointed Custodian	MOTHER: Legal Guardian Court Appointed Custodian		
Name: _____	Name: _____		
Street Address: _____	Street Address: _____		
City, State, ZIP: _____	City, State, ZIP: _____		
14. Names of siblings also requesting reassignment to THIS school:	Name _____	Grade _____	Name _____
	Name _____	Grade _____	Name _____
15. Are siblings requesting reassignment to ANOTHER school Yes <input type="checkbox"/> No <input type="checkbox"/> If YES, what school? _____			
16. Use this space to explain your hardship as to why you are requesting a school outside your district.			

17. Each day, transportation for this child will be provided by: _____	CONDITIONS OF REASSIGNMENT ARE LISTED ON THE BACK OF THIS FORM.
18. Is your child planning to play sports at the school? *see #2 under the reassignment guidelines <div style="text-align: center;">YES <input type="checkbox"/> NO <input type="checkbox"/></div> <div style="background-color: black; height: 10px; width: 100%; margin-top: 5px;"></div> REASSIGNMENTS ARE EFFECTIVE FOR ONE SCHOOLYEAR ONLY. THE LAST DAY FOR REASSIGNMENT REQUESTS FOR THE 2023-2024 SCHOOL YEAR IS MARCH 31, 2023	I have read and understand the guidelines on the reverse of this form and agree to all the conditions therein. Parent Signature and Mailing Address: Signature: _____ Mailing Address: _____
Employee of Craven Co. Schools YES <input type="checkbox"/> NO <input type="checkbox"/>	City State ZIP: _____ Telephone(s) _____ Email Address: _____
<div style="text-align: center;">(For Central Services Use)</div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Approved <input type="checkbox"/> Denied </div> <div style="width: 45%;"></div> </div>	