

# Old Bridge Township Public Schools

Patrick A. Torre Administration Building

4207 Route 516

Matawan, New Jersey 07747

Fax (732) 583-4644

## District Student Transfer Out Verification Form

Current School: \_\_\_\_\_

Student First Name: \_\_\_\_\_ Student Last Name: \_\_\_\_\_

Last Day of School: \_\_\_\_\_

Parent(s) /Guardian (s) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

New Home Address: \_\_\_\_\_

Name of New District: \_\_\_\_\_

Name of New School: \_\_\_\_\_

Address of New School: \_\_\_\_\_

My child \_\_\_\_\_ is transferring to, \_\_\_\_\_

for \_\_\_\_\_ grade. I give permission for Old Bridge Board of Education (OBBOE) to release all my child's school records, including the health records. I am aware that once the records are released and if I choose to keep my child registered at Old Bridge, Old Bridge will need to request the documents back.

Once OBBOE receives the laptop, laptop bag, charger back and textbooks, the transfer will be completed.

Please ✓ check the appropriate reason for the transfer (only One):

\_\_\_\_\_ Transfer to a nonpublic school within the state.

\_\_\_\_\_ Transfer to any public school outside the district but within the state.

\_\_\_\_\_ Transfer out of the state or country.

\_\_\_\_\_ Transfer to parental instruction.

\_\_\_\_\_ Homeschooled – through an online program.

\_\_\_\_\_ Transfer to charter school.

\_\_\_\_\_ Other

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

Date: \_\_\_\_\_

**IN ORDER TO COMPLY WITH THE RULES ADOPTED BY THE STATE BOARD OF EDUCATION-  
NEW JERSEY ADMINISTRATIVE CODE TITLE 6:3 – 2.1, I AUTHORIZE THE ABOVE-MENTIONED  
SCHOOL TO RELEASE ALL SCHOOL RECORDS AND ANY OTHER PERTINENT INFORMATION ON  
THE ABOVE-NAMED STUDENT.**

INTERNAL USE:

Date of Transfer:	Student ID #	Secretary Initials:
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