



COMPLIANCE OFFICE
PHONE (504) 365-5312 • FAX (504) 365-5362

TAG ALONG 2021-2022 TRANSFER REQUEST FORM

Name of Student _____ Grade Entering _____
First Middle Last

Parent/Legal Guardian _____ Phone _____
Home Cell

Address _____
Number & Street Apt. Number City Zip

Date of Birth _____ Regular Education Special Education Exceptionality: _____

Note: Students with an approved Inter-District Transfer may remain at their current school until the terminal, or last grade of the school, but must submit an Inter-District Transfer Form and the Transfer Permission form on a yearly basis.

Parish Currently Residing _____ JPS Attendance Zone _____ School-Based Assignment _____ Requested Feeder School _____

All transfer requests must be signed and may be sent to the Compliance Office at tagalongtransfer@jpschools.org or 501 Manhattan Blvd., Ste. 1100 • Harvey, LA • (504) 365-5312. The parent/guardian will be notified of the status of the transfer request via email.

Please provide your email address: _____

Criteria for Tag-Along Transfers

1. TRANSPORTATION TO AND FROM SCHOOL SHALL BE THE RESPONSIBILITY OF THE TRANSFERRING STUDENT OR HIS/HER PARENT(S)/LEGAL GUARDIAN(S).
2. Children of principals, assistant principals, guidance counselors, teachers, coaches and other certified school employees, and classified employees regularly assigned to or employed on a full-time basis at a school in grades kindergarten through twelve may attend any school in the feeder pattern in which they are assigned.
3. Current proof of residency, the parent's photo ID, the student's birth certificate, and any custody documents must be uploaded.
4. Employees residing outside of Jefferson Parish must also apply and receive an approved Inter-District Transfer Request and Permission Form through the Compliance Office in addition to completing a Tag Along. The permission form must be signed by the Superintendent of the school district in which the employee resides. It is the responsibility of the employee to obtain the approved permission form from the Superintendent and forward the completed document to tagalongtransfer@jpschools.org or at 501 Manhattan Blvd., Suite 1100, Harvey, LA 70058.
5. The principal of the school where the parent is full time based must confirm the employee's status and whether there is an open seat for the student. If the employee is requesting a Tag Along to the feeder(s) school(s), the principal of the feeder school must confirm that there is an available seat for the student.
6. A Tag-along Transfer is only valid for the school year in which it is approved. Students seeking a Tag-along Transfer in any subsequent school year must apply on a yearly basis.
7. With respect to Advanced Studies Academies, students must meet the admissions standards established for enrollment in a particular Advanced Studies Academy and thereafter comply with such enrollment standards as may be prescribed for continued enrollment.
8. If the employee is requesting a Tag Along for more than one child a separate Tag Along Transfer Request must be submitted.

I understand that in the event this transfer request is approved, my child's LHSAA eligibility may be affected. For further information, please contact the Athletics, Health & Physical Education Department at (504) 349-8644 or carl.nini@jpschools.org

Parent's/Legal Guardian's Signature _____ Date Submitted _____

Approved: _____ Denied: _____
School-based Principal's Signature Date

Approved: _____ Denied: _____
Feeder School Principal's Signature Date

Approved: _____ Denied: _____
Compliance Officer/Designee Date

**2021-2022
Assigned School**
