

CQSB CROSS-BOUNDARY / TRANSFER REQUEST

One form must be completed and submitted **per child**.

Cross-Boundary / Transfer requested:

For the current school year	For the next school year
-----------------------------	--------------------------

Student's Family Name:	Student's First Name:
Birth Date:	Permanent Code:
Permanent address of student	
Civic Number:	Street:
Municipality:	Postal Code:

Parent A	Parent B
First Name:	First Name:
Family Name:	Family Name:
Home Phone Number:	Home Phone Number:
Work Phone Number:	Work Phone Number:
Email Address:	Email Address:

Are you requesting a transfer because you are moving (change of address)?

Yes

No

If "yes", please provide us with the information below.

Moving Date (month/day/year):

New address	
Civic Number:	Street:
Municipality:	Postal Code:

Are you requesting a transfer for a humanitarian reason?

No

Yes

Please explain the humanitarian nature of your request below:

SCHOOL ASSOCIATED WITH YOUR TERRITORY based on student's address (if needed, use the tool "Find Your School" on the CQSB website: <https://www.cqsb.qc.ca/en/web/cscq/find-school>):

A. S. Johnson Memorial School	Québec High School
Dollard-des-Ormeaux School	Riverside Regional Elementary School
Everest Elementary School	Riverside Regional High School
Holland Elementary School	Shawinigan High School
Jimmy Sandy Memorial School	New Liverpool Elementary School
La Tuque High School	St. Patrick's High School
MacLean Memorial School	Ste-Foy Elementary School
Mauricie English Elementary School	Three Rivers Academy
Portneuf Elementary School	Valcartier Elementary School

A. School your child is currently attending:	<i>Not attending school yet</i> <i>School outside of CQSB</i> A. S. Johnson Memorial School Dollard-des-Ormeaux School Everest Elementary School Holland Elementary School Jimmy Sandy Memorial School La Tuque High School MacLean Memorial School Mauricie English Elementary School Portneuf Elementary School Québec High School Riverside Regional Elementary School Riverside Regional High School Shawinigan High School New Liverpool Elementary School St. Patrick's High School Ste-Foy Elementary School Three Rivers Academy Valcartier Elementary School	Current Grade Level:	<i>Not in school yet</i> Kindergarten 4 Kindergarten 5 Grade 1 Grade 2 Grade 3 Grade 4 Grade 5 Grade 6 Secondary 1 Secondary 2 Secondary 3 Secondary 4 Secondary 5 WOTP – Prework Training WOTP – Semiskilled Trades Particular Pedagogical Project (15+) Concomitance
--	--	-------------------------------------	---

B. Name of school requested:	A. S. Johnson Memorial School Dollard-des-Ormeaux School Everest Elementary School Holland Elementary School Jimmy Sandy Memorial School La Tuque High School MacLean Memorial School Mauricie English Elementary School Portneuf Elementary School Québec High School Riverside Regional Elementary School Riverside Regional High School Shawinigan High School New Liverpool Elementary School St. Patrick's High School Ste-Foy Elementary School Three Rivers Academy Valcartier Elementary School	If the transfer request is for the next school year:	Kindergarten 4 ¹ Kindergarten 5 Grade 1 Grade 2 Grade 3 Grade 4 Grade 5 Grade 6 Secondary 1 Secondary 2 Secondary 3 Secondary 4 Secondary 5 WOTP – Prework Training ¹ WOTP – Semiskilled Trades ¹ Particular Pedagogical Project (15+) ¹ Concomitance ¹
------------------------------------	--	--	--

¹ If available.

Does your child have an IEP (Individualized Education Plan)?	Yes	No
Does your child require specialized services, extra help or support in school?		
No		
Yes		
Please provide a short description of the services needed:		

IMPORTANT:

- Completion of this application does not constitute an approval of the request.
 - o If you are requesting a transfer for the next school year during the official CQSB Registration Period, an answer will be given to you by June 30th of the current school year.
 - o If you are requesting a transfer for the next school year after the official CQSB Registration Period, an answer will be given to you by August 31st.
 - o If you are requesting a transfer during a school year, an answer will be given to you in 30 days following the reception of your request by educationservices@cqsb.qc.ca
- Please note that transportation is not provided for approved cross-boundary / transfers which are not on the school's territory. Transportation is only provided for students who live on the school's territory.
- Once a request for cross-boundary/transfer has been granted, it is binding and cannot be revoked during the school year.

Parent's Name: (printed)	
Parent's signature:	Date (year/month/day):

Any incomplete form will be returned to parents for completion. The official reception date will be the date when the completed form will have been received at the email address below.

Please return this form to: educationservices@cqsb.qc.ca