## GEORGE COUNTY SCHOOL DISTRICT

494 Cowart Street Lucedale, MS 39452

## **Petition For Enrollment of Out-of-District Student**

To: The Board of Trustees of George Count	y School District
I hereby request that	, in grade
residing with me in the	School District be given permission
(name of district where y	you live)
to attend school in the George County School	ol District at
	(name of George County school)
during the 20 20 school year.	
Reason:	
Printed Name of Parent or Guardian	Signature of Parent or Guardian
Date:	Phone Number:
I agree to pay a tuition fee of \$	_ which will be due at the time of enrollment.
I, Debra D. Joiner, Superintendent, hereby	certify that the Board of Trustees of the Georgo
County School District approved the reques	st for transfer as provided under State Law for
this student to attend the George County S	School District. This is with the understanding
that any additional cost other than state fun	ds shall be paid by the parent or guardian.
Witness my signature this the day of _	
	Superintendent Designee