

TOTOWA BOROUGH PUBLIC SCHOOLS

Office of Curriculum & Instruction

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Patricia Capitelli
Chief School Administrator

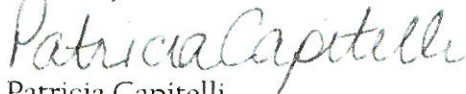
May 10, 2017

Dear Parent(s)/Guardian(s),

Please complete the information below if your child will NOT be returning to the Totowa School District in September 2017.

The information requested is extremely important. Please take a moment of your time and fill in the bottom portion of this form and return it to your child's homeroom teacher by Thursday, May 25, 2017. To receive the transfer information, please contact Ms. Suzanne Siok at 973-956-0010, ext. 3002 *the week of June 19th* to make arrangements to pick-up a copy of the transfer card and immunization records, which you will need to enroll your child in his/her new school.

Sincerely,



Patricia Capitelli
Superintendent of Schools

Please return bottom portion only. Keep the top part as a reminder to contact the school for transfer information.

Only return this form if your child will be transferring out of Totowa Schools.

Student Name: _____ 2017-2018 Grade: _____

New Address: _____

New Phone #: _____ (if available)

Name and Address of the school the student is transferring to:

Last date of attendance in Totowa _____ June 21, 2017

Parent/Guardian Signature _____ Date: _____