

TOTOWA BOROUGH PUBLIC SCHOOLS

Office of Curriculum & Instruction

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Patricia Capitelli
Chief School Administrator

May 10, 2018

Dear Parent(s)/Guardian(s),

Please complete the information below if your child **will NOT** be returning to the Totowa School District in September 2018.

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, 2018**. To receive the transfer information, please contact Ms. Steinhilber at 973-956-0010, ext. 3002 *the week of June 11, 2018* 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: _____ 2018-2019 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 20, 2018

Parent/Guardian Signature _____ Date: _____