APPENDIX E

SEA Transfer Form

Student's Name:	D.O.B.:
Current School:	O.E.N. #:
Receiving School:	

LIST OF EQUIPMENT

Notes:

Attach SEA Inventory Listing (Appendix A) and verify items transferred.

Approved by Sending School: _____	Approved by Receiving School: _____
Date: _____	Date: _____

A copy of this completed form must be sent to the Special Education Secretary @ the New Liskeard Board Office for tracking purposes.