



**RED CLAY CONSOLIDATED SCHOOL DISTRICT  
SCHOOL CHOICE GOOD CAUSE FORM SCHOOL YEAR**

**OFFICE USE**  
Student ID: \_\_\_\_\_

*--MUST ACCOMPANY SCHOOL CHOICE APPLICATION--*

**Student Last Name:** \_\_\_\_\_ **Student First Name:** \_\_\_\_\_

**Current School:** \_\_\_\_\_ **Current Grade:** \_\_\_\_\_

**Please check (✓) the “Good Cause” reason that applies and attach documentation to show the change occurred after the School Choice deadline:**

\_\_\_\_\_ **1. Change in the location of family residence**  
*Required documentation includes a signed lease, signed and dated settlement statement or other document which verifies the date and location of the move.*

**EFFECTIVE DATE OF MOVE:** \_\_\_\_\_

\_\_\_\_\_ **2. Change in the student’s parents’ marital status** *Attach documentation*

\_\_\_\_\_ **3. Change in legal guardianship** *Attach documentation*

\_\_\_\_\_ **4. Placement in foster care** *Attach documentation*

\_\_\_\_\_ **5. Adoption** *Attach documentation*

\_\_\_\_\_ **6. Participation in a foreign exchange program** *Attach documentation*

\_\_\_\_\_ **7. Student’s participation in a substance abuse or mental health treatment program** *Attach documentation*

\_\_\_\_\_ **8. A reported and recorded instance of bullying as defined by defined by Delaware state law.**  
*Attach documentation*

\_\_\_\_\_ **9. Similar circumstances**

**Please give a written explanation of the Good Cause Request:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I understand that transportation will only be provided from an existing Red Clay bus stop to the requested school and agree to abide by the School Choice Program Guidelines of the Red Clay Consolidated School District.*

**Parent/Guardian Signature:** \_\_\_\_\_ **Date of Request:** \_\_\_\_\_