Family Empowerment Unique Abilities Public School Choice Form 2022-2023

*Please fill out the information below and email or fax:

Danielle.Compton@stjohns.k12.fl.us 904-547-7544

| Student's Last Name: | |
|---|---|
| Student's Frist and Middle Name: | Student ID: |
| Parent Name (Last, First): | Grade for 2022-2023 |
| Parent Email Address: | |
| Student's DOB: | |
| Residence County: | |
| Enter your child's zoned school for 2022-2023. Attendance Zone Locator 2022-2023) | (If you are unsure of your zoned school, please visit |
| Enter your child's requested school : | |
| Current Mailing Address: | |
| City, Zip: | |
| Phone Number: | |
| Reason for FES Public School Transfer Request: | |
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Submission of this form does not guarantee your student's eligibility for transfer