



**Government of the Republic of Trinidad and Tobago**

Ministry of Education

**SECONDARY ENTRANCE ASSESSMENT (SEA) 2024**

**REQUEST FOR TRANSFER APPLICATION FORM**

*(To be completed for students requesting to move from their assigned school to another school of choice)*

Student Surname

Student Other Names

Composite Standard Score

SEA Candidate Number: 



 Male  Female

Primary School Attended:

Secondary School Assigned:

Parent/Guardian Name:

Address:

Telephone Contact: Home 



 Work

**TRANSFER REQUEST:**  
1<sup>st</sup> Choice School:

2<sup>nd</sup> Choice School:

**REASON FOR REQUEST:**  
\_\_\_\_\_  
\_\_\_\_\_

Please attach supporting documents e.g. medical certificate.

_____ Parent/Guardian Signature	_____ Principal's Signature	_____ School Supervisor
_____ Date	_____ Date	_____ Date

Cut here **ACKNOWLEDGEMENT SLIP** To be given to Parent/Guardian

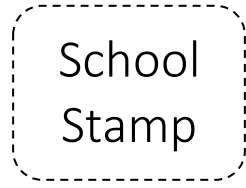
Student Name:

Secondary School Assigned:

SEA Candidate Number:

1<sup>st</sup> Choice requested:

2<sup>nd</sup> Choice requested:



**PARENTS ARE REMINDED THAT THIS REQUEST DOES NOT GUARANTEE A TRANSFER**

*The criterion for transfer is not listed in any order of priority Transfer is not guaranteed, even if any of the official criteria has been met. All secondary schools have received their full allocation during the placement process and transfers will therefore depend on the availability of places.*