

Return this completed form to your home school district.

For school year _____

School Districts of Santa Cruz County

For grade _____

Request for Interdistrict Attendance Permit

New student Continuing student

Part A: Parent/Guardian completes this section and returns all copies to school district of residence.

Student's Name: _____, _____ Date of Birth: _____
Last Name First Name

School District of Residence: _____ County: _____

School of Attendance or Last Attended: _____ Current Grade: _____

School District of Desired Attendance: _____ County: _____

School Requested: _____ (District retains the right to assign student to any school.)

Important: Each school district in Santa Cruz County has a local policy and criteria for accepting or denying requests for interdistrict attendance permits which may or may not include the reasons listed below. After reviewing the policies of your district of residence and the district of desired attendance, check the reason for requesting the interdistrict attendance permit. Attach a written explanation or documentation where requested.

Reason for request:

- Child care (name, address, and phone of provider) _____
- Specialized or unique educational program (describe) _____
- Mental or physical health and/or safety needs (attach statement from physician, psychologist, juvenile authority or appropriate school staff)
- Recommended by SARB and/county agency for home or community problems (provide written documentation)
- Complete current school year or remain with a graduating class
- Moving into district in the immediate future (provide written evidence)
- Sibling attending (name, grade and school) _____
- Other: _____

For information purposes only and for the sole purpose of determining capacity and space issues which would require the creation of a new program or service, has this student or does this student currently receive special education or other special services? Yes No

(describe) _____

Is this student currently under an expulsion order? Yes No If yes, attach copy

Name of parent/guardian: _____ Home phone: _____

Complete address: _____ Work phone: _____

I declare, under penalty of perjury under the laws of California, that the information provided above is true and accurate. I understand that this information may be verified and that inaccurate or false information may subject my request to denial or revocation. I understand that I am responsible for the transportation of my student. I further understand that, to maintain this permit, my student must comply with the terms and conditions of the districts' attendance agreement, if any, which includes but is not limited to those terms and conditions set forth below and the Academic, behavior, and attendance policy requirements of the district of desired attendance. I understand that the interdistrict attendance permit must be renewed annually, if the above listed districts have an attendance agreement which provides for such. I further understand that neither district may rescind an existing permit for a student entering grades 11 or 12 in the subsequent school year.

(signature of parent/guardian)

(date)

Part B: School district of residence completes and forwards all copies to school district of desired attendance.

Action of **District of Residence:** Current Attendance Agreement with District of Attendance Date received: _____

Approved – terms and conditions: _____

Denied - reason: _____

(Signature and title of authorized representative)

Date: _____

Part C: School district of desired attendance completes and distributes copies as indicated below.

Action of **District of Desired Attendance:** Date received: _____

Approved – terms and conditions: _____

Denied - reason: _____

(signature and title of authorized representative)

Date: _____

PARENT RIGHTS AND DUTIES

Relating to Interdistrict Attendance Agreement Requests

As a parent or legal guardian, you have the right to:

- Request an interdistrict attendance agreement from your district of residence.
- Receive a written copy of local school board policy relating to interdistrict attendance agreement requests from both the district of residence and the district you desire to attend.
- Receive a written copy of the Districts' Attendance Agreement, if any, which stipulates the terms and conditions under which the interdistrict attendance shall be permitted or denied.
- Discuss your situation with your local district superintendent or appointed designee.
- Appeal an adverse decision to the school board denying the permit request, pursuant to that school board's policies, and receive written notice of local board action within a period of time specified by the board policy.
- Receive notification from the district denying the request or the district of residence, within 30 days of a request for an interdistrict transfer, regarding the process for appeal to the Santa Cruz County Board of Education.

You are encouraged to review the governing board policy for further information and any additional rights.

AREA SCHOOL DISTRICT OFFICES

**IN ORDER TO COMPLETE YOUR ENROLLMENT AT PACIFIC ELEMENTARY SCHOOL,
PLEASE COMPLETE AN INTER-DISTRICT TRANSFER FORM AND SUBMIT IT TO THE
DISTRICT OFFICE IN YOUR AREA OF RESIDENCE.**

**Bonny Doon Elementary
1492 Pine Flat Rd.
Santa Cruz, CA 95060
Phone: 831-427-2300
Fax: 831-427-2800**

**San Lorenzo Valley Unified
325 Marion Avenue
Ben Lomond, CA 95005
Phone: 831- 336-5194
Fax: 831-336-9531**

**La Honda-Pescadero Unified
PO Box 189
Pescadero, CA 94060-0189
Phone: 650-879-0286
Fax: 650-555-1212**

**Santa Cruz City Schools
133 Mission St #100,
Santa Cruz, CA 95060
Phone: 831-429-3410
Fax: 831-429-3450**

**Live Oak School District
984-1 Bostwick Lane
Santa Cruz, CA 95062
Phone: 831-475-6333
Fax: 831-475-2638**

**Scotts Valley Unified
4444 Scotts Valley Dr.
Suite 5B
Scotts Valley, CA 95066
Phone: 831-438-1820**

**Pajaro Valley Unified
294 Green Valley Rd.
Watsonville, CA 95076
Phone: 831-786-2100**

**Soquel Union Elementary
620 Monterey Avenue
Capitola, CA 95010
Phone: 831-464-5630
Fax: 831-479-7182**