



# EUREKA UNION SCHOOL DISTRICT

5455 Eureka Road, Granite Bay, CA 95746  
Phone: (916) 791-4939 • Fax: (916) 791-5527

## Request for Interdistrict Transfer Attendance Form

*Please complete one form per child.*

New or Renewal: \_\_\_\_\_

School Year: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Grade (for school year requested): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing address (if different than above):

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian First Name: \_\_\_\_\_ Parent/Guardian Last Name: \_\_\_\_\_

Parent/Guardian Phone: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Parent/Guardian Email Address: \_\_\_\_\_

Resident District: **EUREKA UNION SCHOOL DISTRICT** School of Attendance: \_\_\_\_\_

Requested District: \_\_\_\_\_ Requested School: \_\_\_\_\_

Reason for Request:  Employment  Childcare  Sibling at this school  Continued Enrollment

If the reason is for employment or daycare, please provide the name, address and phone number:

\_\_\_\_\_

Is this student currently under an expulsion order? \_\_\_\_\_ (If yes, from which school/district?)

\_\_\_\_\_

Is your student receiving Special Education Services? \_\_\_\_\_

If yes, which services (please check one or more):

Moderate to Severe Program  Mild to Moderate Program  Speech & Language

Occupational Therapy  Adaptive Physical Education  Section 504 Plan

### Terms and Conditions/Standards

1. This application form must be submitted by any deadline established in each district's policy/regulation. Failure to submit an application by this deadline is good cause for denial.
  2. Any false or misleading information provided to support a request may be grounds to deny, revoke or not renew a permit
  3. The terms and conditions to approve or deny an initial request are included in the board policy/regulation of each district but may include space availability, enrolling siblings in the same district and/or allowing students to complete a school year. The decision whether to approve or deny an initial request will be made by each district in accordance with its policy/regulation.
  4. Interdistrict transfer students must annually reapply to both districts. The re-application must be approved by both districts in order for students to continue attending school in the district of enrollment.
  5. The standards for reapplication are included in the board policy/regulation of each district but may include space availability, district resources, and the enrollment and/or participation in the requested educational program. The decision to renew an existing permit will be made by each district in accordance with its policy/regulation.
  6. The terms and conditions for revocation of an existing permit are included in the board policy/regulation of each district but may include violation of district and/or school rules, and/or failure to demonstrate acceptable academic performance, attendance and/or behavior. Any decision to revoke a permit may be made by each district in accordance with its policy/regulation.
  7. Transportation to and from school is the responsibility of the parent/guardian.
  8. Student athletes must check the CIF eligibility rules before submitting their application.
  9. No financial obligation shall be incurred by the district of residence for services rendered under this permit.
- Upon the full execution of this application form, the terms and conditions/standards listed in 1-9 above will form the interdistrict attendance agreement between the districts.*

Parent/Guardian (please PRINT name): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Eureka Union School District Office Use Only

Granted  Denied

\_\_\_\_\_ Date: \_\_\_\_\_

Resident District Superintendent's Signature

For Requested School District Office Use Only

Granted  Denied

\_\_\_\_\_ Date: \_\_\_\_\_

Requested District Superintendent's Signature