

**RINCON VALLEY UNION SCHOOL DISTRICT
K-6 CHARTER REQUEST FORM**

This form is to be filled out and returned to the district office at 1000 Yulupa Avenue if you wish your child to attend a charter school in Rincon Valley USD.

Please check one of the following:

- Student(s) resides in the Rincon Valley Union School District (Priority #3)
- Student(s) resides outside the Rincon Valley Union School District (Priority #4)

1. Child's Name _____ Grade _____

School of Residence _____ Requested school _____
For school year 20____ - 20____

2. Child's Name _____ Grade _____

School of Residence _____ Requested school _____
For school year 20____ - 20____

Do siblings of the student currently attend the school to which transfer is requested?
_____ (Yes or No)

Is parent an employee of the Rincon Valley Union School District? _____ (Yes or No)

Have you ever been referred to a School Attendance Review Board (SARB)? _____ (Yes or No)

Reason for request: _____

I understand that I am responsible for the transportation of my student(s). _____ (initial)

Parent's Name (Print)	Date
Parent's Signature	Telephone #
Residence Address	E-Mail
Zip Code	

For Office Use Only

Date Request Received	Date Acknowledgement Letter Sent
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Reason for Denial	Superintendent's Office
	Date