

South Fork Union School District

5225 Kelso Valley Road

Weldon, California 93283

Phone: (760) 378-4000 FAX: (760) 378-3046

Robin Shive, Interim Superintendent/Principal <http://www.southforkschool.org>

INTERDISTRICT ATTENDANCE AGREEMENT REQUEST

This is to request an Interdistrict Attendance Agreement for School Year 20__-20__ for:

Name _____ Grade _____ Name _____ Grade _____

Name _____ Grade _____ Name _____ Grade _____

Address _____ Zip Code _____ Telephone _____

who lives in the _____ School District

to go to _____ School in the _____ School District.

The reasons for this request are as follows: _____

If the reason given is child care, please fill in the following:

a BABYSITTER: Name _____

Address _____ Zip Code _____ Telephone _____

b PARENT EMPLOYMENT:

Father _____ Name of Business _____ Work Hours and Days _____

Business Address _____ Telephone _____

Mother _____ Name of Business _____ Work Hours and Days _____

Business Address _____ Telephone _____

I declare under penalty of perjury that the above information is accurate to the best of my knowledge. I further acknowledge that attendance in a non-resident district is a privilege and not a right. I acknowledge that the district granting this request shall have the right to revoke and end this agreement if (1) the district of attendance makes a reasonable determination that the continuing presence of the student would interfere with the needs of the district, the best interests of the student, or both; and (2) the district of attendance gives five (5) school days notice prior to the revocation of this agreement. I understand that I have a right to appeal any decision regarding this request by either district to the county board of education pursuant to Education Code section 46601. I further understand that the Interdistrict Attendance Agreement only covers the school year indicated above.

Signed _____ Date _____

Relationship _____

For District Use Only

☐ Request denied by _____ Date _____

School District

☐ Request granted by the governing boards of the school districts above named for the school year 20__-20__, subject to the following terms:

a. Parents provide own transportation. ☐ Yes ☐ No

b. District of attendance to receive the average daily attendance for apportionment purposes.

District of Residence _____ District of Attendance _____

Agreement Approved _____ Agreement Approved _____

By _____ By _____

Distribution: ☐ District of Residence ☐ District of Attendance

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