

# Request for Interdistrict Attendance Permit

For grade  
 New Request

For school year  
 Continuing Request

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

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 School District of Residence: \_\_\_\_\_ County: Santa Cruz  
 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 permits. Attach a written explanation or documentation where requested.

**Reasons for request:**

- Child care (name, address, 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)
- Siblings 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: \_\_\_\_\_ Email: \_\_\_\_\_

Complete Address: \_\_\_\_\_ 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 permits 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. Unless other arrangements have been made, should your student not enroll and attend within 20 days of the first day of school, this agreement will be null and void.*

\_\_\_\_\_  
 (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 or Residence:  Current Attendance Agreement with District Attendance  
 Approved - terms and conditions: \_\_\_\_\_  
 Denied - reason: \_\_\_\_\_  
 \_\_\_\_\_ Date: \_\_\_\_\_

(Signature and title of authorized representative)

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

(Signature and title of authorized representative)