

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

## Perris Union High School District

### Regulations and Policies Governing Interdistrict Attendance Permits

1. In accordance with Sections 46600 to 46609 of the Education code, the school districts of Riverside County establish Interdistrict agreements annually which provide for the exchange of pupils.
2. The enrollment of pupils from districts, other than that of residence is not mandatory. If there is sufficient room in the district, school, and program of desired attendance, requests will be considered, provided the reasons are justifiable and in accordance with district governing board policy.

Interdistrict Attendance Permits to *leave* the district of residence may be granted for the following reasons:

- a. To meet the student's special mental or physical health needs as certified by a physician, school psychologist, or other appropriate school personnel.
- b. When the student has a sibling attending school in the receiving district, to avoid splitting the family's attendance.
- c. To allow the student to complete a school year when the student's parents/guardians have moved out of the district during that year.
- d. To allow the student to remain with a class graduating that year from a middle school or high school.
- e. To allow a high school senior to attend the same school attended as a junior, even if the student's family moved out of the district during the junior year.
- f. When the parent/guardian provides written evidence that the family will be moving into another district in the immediate future and would like the student to start the school year in that district.
- g. When recommended by the school attendance review board or by county child welfare, probation, or social service agency staff in documented cases of serious home or community problems which make it inadvisable for the student to attend the school of residence.
- h. To provide a change in school environment for reasons of personal and social adjustment.

**\*I have read and understand the above regulations and policies governing interdistrict attendance permits.**

**Parent/Guardian Initials: \_\_\_\_\_**

3. **Requests based upon convenience or personal preference may not be considered.**

4. **Transportation is the responsibility of the parent/guardian.**

5. Procedure for making application for interdistrict attendance:

- a. Complete the Request for Interdistrict Attendance Permit and fill in "reasons for request" in space provided. Provide any additional support documents as needed. Be sure to sign the application.
- b. Submit the request for approval to the authorized district administrator in the district of residence.
- c. If approved, take request form to authorized administrator of school district of desired attendance.
- d. The parent/guardian will be notified by mail of the final decision regarding the request.

**\*I have read and understand the above regulations and policies governing interdistrict attendance permits.**

**Parent/Guardian Initials: \_\_\_\_\_**

**If you have any questions pertaining to the procedure outlined above, the office from which you obtained this form in the school district of residence will assist you.**

6. An Interdistrict Attendance Permit for interdistrict attendance is valid only during the school year for which it is issued. It is furthermore valid only while the conditions stated in the request are maintained; and will be continued in force only as long as the pupil's attendance, citizenship, and scholarship are satisfactory to the school of attendance.

7. **Falsification of any information stated on this request is cause for immediate revocation of an interdistrict transfer and no further application will be considered.**

8. California Interscholastic Federation grades 9-12 athletic eligibility may be negatively affected by this transfer. (CIF Southern Section Blue Book section 206).

**APPEAL PROCESS: MUST SUBMIT A WRITTEN APPEAL TO RIVERSIDE COUNTY OFFICE OF EDUCATION**

- Database
- Letter
- IC

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

Perris Union High School District  
 1151 North "A" Street, Perris, CA 92570  
 Phone: 951.943-6369 ext. 81200 Fax: 951.943-6419 Email: puhsd-registration@puhsd.org

### REQUEST FOR INTERDISTRICT ATTENDANCE PERMIT

New  Renewal

#### PLEASE PRINT

Pupil's Last Name		Pupil's First Name		Date of Birth	Grade
Parent/ Guardian			Home Phone / Cell Phone		Email
Residential Address				City/Zip Code	
Mailing Address (if different)				City/Zip Code	
District of Residence <b>PERRIS UNION HIGH SCHOOL DISTRICT</b>			School of Residence		
District of Desired Attendance			School of Desired Attendance		
District Now or Last Attended			School Now or Last Attended		

**REASON FOR REQUEST: (see explanation on reverse side):**

**Explanation of Reason for Request:**

<input type="checkbox"/> Special Mental or Physical Health Needs	
<input type="checkbox"/> Sibling in Receiving District	
<input type="checkbox"/> To Complete School Year Following a Move	
<input type="checkbox"/> Senior Privilege Remain with Graduating Class	
<input type="checkbox"/> Planned Move	
<input type="checkbox"/> Other	

**Provide full name, address and phone number of child care provider.**

**Check appropriate special program (if applicable):**

- Special program/class \_\_\_\_\_
- IEP **-If yes, attach IEP**
- Section 504 Accommodations
- Currently suspended or expelled

**TERMS & CONDITIONS:** This permit is valid only for the school year granted, while conditions stated are maintained, and as long as the student's attendance, citizenship and scholarship are satisfactory to the district of attendance. A permit may be revoked for cause at any time. False or misleading information may be cause for denial or revocation. Approval is subject to space availability in the district and may not be at the site requested. Individual district policies pertain to each permit. **Parent initials** \_\_\_\_\_

I have read and understand the regulations and policies governing interdistrict attendance permits (on reverse side) and hereby submit my application. I declare under penalty of perjury that the information provided above is true and accurate. I understand that this form will be provided to the district of residence and the district of desired attendance and information provided is subject to verification.

Signed \_\_\_\_\_ Date \_\_\_\_\_

#### For School District Office Use Only

As the authorized administrator for the **district of residence**, I recommend the following action:

- |  |  |
|--|--|
| <input type="checkbox"/> <b>Approval</b> for release pending concurrence with receiving district | <input type="checkbox"/> <b>Denial</b> |
| Signature _____  | Date _____                             |

As the authorized administrator of the district of desired attendance, I recommend the following action:

- |  |  |
|--|--|
| <input type="checkbox"/> <b>Approval</b> to attend | <input type="checkbox"/> <b>Denial</b> |
| Signature _____                                    | Date _____                             |

Reason for denial: \_\_\_\_\_