

# Inter-District Attendance Agreement

PLUMAS COUNTY OFFICE OF EDUCATION

PLUMAS UNIFIED SCHOOL DISTRICT

50 Church Street, Quincy, CA 95971

Phone: (530) 283-6500 Fax: (530) 283-6530

One application per student

School Year of application: \_\_\_\_\_

All applications for interdistrict transfer must be received by the district in writing, using the approved form, each year. All grounds supporting the application must be set forth in a single application. Multiple or successive applications will not be considered by the district.

PROCEDURE for completing this application:

- a. Complete this form.
- b. Obtain approval of the authorized school administrator of the district of residence.
- c. Approved form is forwarded to administrator of the school district of desired attendance.
- d. Parent/guardian will be notified by mail of the final decision on the request.

Student's Name \_\_\_\_\_ Birth date: \_\_\_\_\_ Grade: \_\_\_\_\_

Name of Parent/Legal Guardian: \_\_\_\_\_

Physical Address: \_\_\_\_\_ PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

School District of Residence \_\_\_\_\_

School District of Desired Attendance \_\_\_\_\_

Explanation of reason(s) for request: \_\_\_\_\_

If your reason is employment or child care related, please provide official documentation with contact name, address and phone number.

Does your child require any special education or instruction services, e.g., special education, ESL, Section 504, gifted and talented?

No  Yes If yes, describe: \_\_\_\_\_

Is this student currently under an "Expulsion Order"?  Yes  No

Has this student been recommended for expulsion?  Yes  No

### CONDITIONS

In making this application, I understand that my child must meet acceptable standards of attendance and conduct as established by the school principal and district policies, and that my child is not currently under an expulsion order. I further understand that a variance will be granted only when appropriate space is available and that the variance may be revoked at any time by the receiving district as a result of discipline, attendance problems, or classroom overcrowding. I accept responsibility for providing transportation for my child. I have read and understand the regulations and policies governing interdistrict attendance agreements (attached) 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, the district of desired attendance, and the Plumas County Office of Education and information provided is subject to verification."

\_\_\_\_\_  
Date of Request

\_\_\_\_\_  
Parent/Legal Guardian Signature

