



**2018/ 2019
SCHOOL YEAR**

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Notified:
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Letter:
Aeries:

INTER-DISTRICT TRANSFER APPLICATION

Please Note: This is an application to request a transfer from your student's current school to a school *outside* of San Jacinto Unified School District for the following school year **2018-2019**. Please complete one application per child.

PLEASE PRINT

Pupil's Last Name	Pupil's First Name	Date of Birth	Current Grade
Parent/Guardian		Home Phone	Work/Cell
Residential Address		City/Zip Code	
Mailing Address if different		City/Zip Code	
District of Residence San Jacinto Unified School District		School of Residence	
District of Desired Attendance		School of Desired Attendance	
District Now		School Now	
Reason For Request: (Please attach supporting documents i.e. work schedule, child care verification, district pay stub or badge)			

Check appropriate specialized program (if applicable, explain)

IEP (attach current IEP)	YES	NO	
Specialized program/Class	YES	NO	
Section 504 accommodations (attach 504 plan)	YES	NO	
Currently suspended or expelled	YES	NO	

Parent Agreement

I understand that:

1. Approval for transfer is based on available space at the school, program, or district requested.
2. My student must maintain satisfactory attendance, citizenship and scholarship.
3. A permit may be revoked for cause at any time.
4. I am responsible for transporting my child to and from the new school.
5. This form will be provided to the district of desired attendance and is pending concurrence with receiving district
6. All information provided on the permit must be correct and kept current. Please notify the district of any changes.
7. Information provided is subject to verification. False or misleading information may be the cause for denial or revocation.
8. The district requested may have transfer guidelines and deadlines that I need to abide by. I will contact the district to find out what they are.
9. Denials will be sent by U.S. mail within 30 days of receipt of the application. If transfer is released, the original form will be forwarded to the district requested, I will contact them for their processing timeline.

E.C. 46600 Failure to adhere to the above terms/conditions may result in revocation of this permit

Signature: _____ Date: _____ Relationship to the Student: _____

For District Use Only

School District of Residence		School District Requested	
Approved:	Denied:	Approved:	Denied:
Reason:		Reason:	
District: San Jacinto Unified School District		District:	
By:	Date:	By:	Date: