RUSD #_

KUSD #			
R.U.S.D. – Child Welfare & Attendance 260 S. Willow Ave. Rialto, CA 92376	School Districts of San B Application for Interdistrict	-	
Parent to complete the following (any bl	anks can delay the process):		
□ New Request □ Renewal	School	Year Grad	le
Student Name		Birth date	□ Male □ Female
School District of Residence RIALTO U	NIFIED SCHOOL DISTRICT		
Rialto School of Residence		_	
School Dist. of Desired Attendance		_ School Requested	
Parent/Guardian Name		Special Education Student*	□ Yes □ No
Parent/Guardian Address		_ Identification Category, if yes	
City/Zip			
Telephone /		costs, fees or transportation.	
(Home)	(Cell or Work)	504 Student	□ Yes □ No
Is the student currently under an expulsion	on order?	□ No	
Reason For Request			
□ Health Reasons: Attach verification from a licensed physician or clinical psychologist		☐ To complete current year after moving to another attendance area	
□ Pending change of residence this year. Attach a		□ Other	
copy of escrow or similar document (9	0 day limit)		
	Attach Separate	Sheet if Necessary	
Child Care Person/Agency	Employer Information – Father Employer Information - Mother		
NameAddress			
Phone			
Signature of child care provider			
	TERMS ANI	O CONDITIONS	
I declare under penalty of perjury that the above information is accurate to the best of my knowledge. <u>I further acknowledge that attendance in a non-resident district is a privilege and not a right</u> . I understand that it is my responsibility to transport the student to and from school. I understand that the student named herein will be transferred back to his/her district of residence if facilities are not available in the district the student wishes to attend or for unsatisfactory attendance, unsatisfactory scholarship, unsatisfactory citizenship, failure to disclose excess cost program needs or disciplinary status (expulsion) information, or for any other reasons as determined by District policy. Note: Excess costs may relate to, but are not necessarily limited to, space available, specific program needs, limits on enrollment in specific grades or programs, and staffing. I understand that this form will be provided to the district of residence, the district of desired attendance, and that the information provided is subject to verification.			
THIS BOX FOR SCHOOL DISTRICT			
		Date Received	
As the authorized admin	nistrator for the district of reside	ence, I recommend the following ac	ction (check one):
□ Approved □ Denied	Reason		
Authorized Signature	Title Agent: Child Welfare and Attendance Date		
As the authorized admin	istrator for the desired district of	f attendance, I recommend the follo	owing action (check one):
□ Approved □ Denied		·	-
Authorized Signature	Title		_ Date

INSTRUCTIONS

Please read these instructions before completing the application.

NOTE: If you live in Rialto Unified School District (which includes parts of Colton, Fontana, and San Bernardino) and wish to attend a school in another district, you must request an Inter-District Attendance Permit (Transfer) using this form. If you live in another district and wish to attend school in Rialto Unified, you must complete the form in the district in which you live.

IDENTIFYING INFORMATION: Complete the identifying information and details about the requested school.

REASON: A transfer may be granted only if one or more of the following reasons apply:

- Employment: One or both parents work in the area of attendance more than 51% of the day. You will need to provide the name, address and phone number of the employer.
- Child Care: Care is located in the attendance area of school requested. You will need to provide the name, address, and phone number of the childcare provider.
- Moving: A transfer may be granted when you have moved from (or are about to move into) the Rialto attendance area during the year and wish for the student to remain at the same school for the remainder of the school year. A transfer may also be granted when the student has moved temporarily and will be returning to the attendance are in one year or less. You will need to provide verification that you are moving by providing lease agreements, escrow papers, or such.

SPECIAL EDUCATION: Indicate whether the student requires Special Education Services. These include Special Day Class (SDC), Resource Specialist Program (RSP), Speech, Language, or any other program which requires an Individualized Education Plan (IEP).

SUSPENSION / EXPULSIONS: Failure to complete this information may result in Denial of requested transfer and will be cause for the other district to void the transfer.

SIGNATURE: Please read the terms of transfer, sign and date the application.

Return the application to the Child Welfare and Attendance Office at 260 S. Willow Ave., Rialto, California 92376. If approved by Child Welfare and Attendance, the application will be sent to the requested district of attendance. The application must be approved by the requested district before the transfer becomes final.

If your request is denied by the Rialto Unified School District's Agent of Child Welfare and Attendance, you may appeal, in writing, to the Lead Agent of Student Services. If your request is denied, you may appeal to the Lead Innovation Agent in the Education Services. After final decision on appeal at the District level, you will have thirty days to appeal to the County Board of Education.