

Paradise Unified School District
6696 Clark Road
Paradise, CA 95969
Telephone (530) 872-6400 FAX (530) 872-6409

APPLICATION AND AGREEMENT FOR ATTENDANCE IN ANOTHER DISTRICT

Name of Student(s) _____ Date of Birth _____ Grade _____
_____ Date of Birth _____ Grade _____
_____ Date of Birth _____ Grade _____
Name of Parent _____ Home Phone _____ Bus. Ph. _____
Residence Address _____
_____ Mailing Address _____

Is your student currently expelled, on a suspended expulsion or discipline contract? Yes No If yes, explain on separate sheet
School Now Attending _____

Programs in which student participates: GATE Band Title 1 Special Education Athletics Other

APPLICATION

I request that my child(ren), named above, be permitted to attend _____ School
in the _____ School District during the _____ School Year.

Briefly state your reason for this request: _____

AGREEMENT

In the event this application is approved, I agree and understand that:

1. The above-named student will be transferred back to his/her district of residence if facilities or program become unavailable in the school the student is assigned to attend.
2. If the student demonstrates unsatisfactory attendance, scholarship, or citizenship, approval may be cancelled.
3. Falsification or misrepresentation of information on this form constitutes grounds for refusal or cancellation of this permit.
4. The parent will assume responsibility for all transportation for the above-named student to and from school.
5. This agreement expires at the close of the current school year.

Signature of Parent/Guardian

Printed Name of Parent/Guardian

Date

RELEASE/DENIAL OF RELEASE BY DISTRICT OF RESIDENCE

The above-named student is released denied release by the _____ School District
for attendance in the _____ School District.

Signed _____ Title Superintendent Date _____

ACCEPTANCE/DENIAL BY REQUESTED DISTRICT OF ATTENDANCE

The above-named student(s) is accepted for denied attendance in the _____ School District.
He/She will be assigned to the _____ School.

Signed _____ Title Superintendent Date _____

In addition to the conditions stated herein, this attendance agreement is subject to all the terms and conditions of the Interdistrict Attendance Agreement currently in effect between the above District of Residence and the District of Attendance. The District of Attendance is to receive the state apportionment for the Average Daily Attendance accrued in the same manner as if the student were a resident of the District of Attendance. No tuition shall be charged.