

PALO ALTO UNIFIED SCHOOL DISTRICT
25 CHURCHILL AVENUE, PALO ALTO, CA 94306
PHONE: (650) 329-3761 FAX: (650) 321-4525

REQUEST FOR INTERDISTRICT ATTENDANCE PERMIT

District of Residence: PALO ALTO	School Year	New Request	Renewal Request
District Requested:		School Desired:	

This form is used by parents/guardians requesting a permit allowing their child to attend school in another district (i.e., district requested) rather than the district in which they live (i.e., district of residence). Special Note: Transfer requests made because a parent/guardian works in the requested district are known as Alien Bill Requests; these requests are subject to special Education Code provisions as noted below.

STUDENT AND PARENT/GUARDIAN INFORMATION			
Student Name _____	Birthdate _____	Grade today _____	<input type="checkbox"/> M <input type="checkbox"/> F
Parent/Guardian's Name _____	Parent/Guardian's Name _____		
Home Address _____	Home Address _____		
Home Phone _____	Work Phone _____	Home Phone _____	Work Phone _____
Will student need ROC/Adult Ed Services? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If the student receives special services, indicate which type			
<input type="checkbox"/> 504 Plan	<input type="checkbox"/> Speech	<input type="checkbox"/> Special Day Class	<input type="checkbox"/> Resource Specialist Program Other: _____

REASON(S) FOR THE REQUEST	
Please check one or more of the reasons for the request listed below and then, if necessary, use the space to the right to further explain. Attach supporting documentation if required.	
<u>Reasons for the request</u> <input type="checkbox"/> Child Care <input type="checkbox"/> Change of Residence <input type="checkbox"/> Employment within District <input type="checkbox"/> Other	<u>Explanation if Necessary</u>

PARENT/GUARDIAN STATEMENT	
In making this request, I understand the following conditions: 1) approval by both districts is required; 2) the district requested may investigate the student's attendance, behavior, and academic records before acting on the request (academic records not investigated with Alien Bill requests); if granted, this permit will be in force for one (1) year and will remain in force only if the student meets the attendance, behavior, and academic requirements of the district requested; 4) if the permit is granted, the student and parent/guardian will be expected to cooperate with school personnel; 5) if the permit is granted, the parent/guardian will be responsible for the student's transportation to and from school; and 6) if the request is denied by the district, and all appeal rights have been exhausted in the district, I have the right to appeal the decision to the Santa Clara County Board of Education (no County Board appeal right for Alien Bill Transfers). I hereby certify that the student and parent/guardian information provided above is accurate and that I understand and agree to the above stated conditions.	
Signature of Parent/Guardian _____	Date _____

DECISION OF AFFECTED DISTRICTS			
DISTRICT OF RESIDENCE		DISTRICT REQUESTED	
Approval <input type="checkbox"/>	Denial <input type="checkbox"/>	Approval <input type="checkbox"/>	Denial <input type="checkbox"/>
Reason(s) for Decision if Denied:		Reason(s) for Decision if Denied:	
Administrator: _____	Date: _____	Administrator: _____	Date: _____
Phone: (650) 329-3717	Fax: (650) 321-4525	Phone: _____	Fax: _____

PROCESS AND TIMELINES FOR INTERDISTRICT ATTENDANCE AGREEMENTS AND APPEALS

(Education Code §§46601-46601.5)

Requests to Districts:

1. Parents/guardians wishing to request that their child be transferred from their district of residence to another district must complete the "Interdistrict Attendance Permit" form and submit it to both districts- The form may be obtained from the district of residence's administrative office.
2. The districts must respond to requests according to the following timelines:
 - requests for the current school year (30 calendar days from receipt of the request), and
 - requests for the subsequent school year (14 calendar days from the start of instruction in the school year).
3. Requests for the subsequent school year which are made fewer than 30 calendar days before the first day of school must be resubmitted after the start of school and will then be considered as requests for the current school year.
4. Requests which have been granted will be in force for one school year and will remain in force only if the student meets the attendance, behavior, and academic requirements of the district requested.

Appeals to the County Board of Education:

1. If either or both districts deny the request or fail to approve the request within the timelines noted above, the parents/guardians have the right to file an appeal with the County Board of Education within 30 calendar days. Appeals must be filed in writing on the ^Interdistrict Attendance Appeal Request^ form, which may be obtained from the **Santa Clara County Office of Education; 100 Ridder Park Drive, Mail Code 201, San Jose, CA 95131-2398, phone (408) 453-6509.**
2. The appeal hearing before the County Board must be scheduled within 30 calendar days from the date of filing, except that this time requirement may be extended by an additional 5 calendar days for good cause.
3. The County Board has no authority to consider the following:
 - the actual school within the requested district,
 - employment-based interdistrict transfer requests (also known as "Allen Bill requests),
 - denials of interdistrict transfer requests for students who have been expelled or are being considered for expulsion,
 - denials of intradistrict transfers within the same district, or
 - special education issues which are subject to Education Code §5000 et. seq.
4. When granting an appeal, the County Board will indicate the duration of attendance, which is generally one school year.