School Year: **2019-2020**

WESTSIDE UNION SCHOOL DISTRICT

41914 N. 50th Street West, Quartz Hill, California 93536

INTRA-DISTRICT ATTENDANCE APPLICATION 6TH GRADE PROGRAM

Please Print Legibly - List only one child per form		
Child's Name:	Middle	
Birthdate (mm/dd/yyyy):/	Gender: Female Male Grade in 20)19-20: <u>6th</u>
School of Residence: School Currently Attending: Desired School of Attendance:		
Parent/Guardian Name:	Home Telephone: ()	
Address:	Work Telephone: ()	
City: Zip Code:	Cell Telephone: ()	
Does this child receive Special Education Services? No Yes, if yes: Special Day Resource Speech		
If you are applying for more than one (1) 6th grade program. Please indicate the school order: Gregg Anderson Joe Walker Joe Walker Ist Choice 2nd Choice 2nd Choice 3rd Choice Not Applying Hillview Ist Choice 2nd Choice 2nd Choice 3rd Choice Not Applying Hillview 2nd Choice Not Applying What Applying Ist Choice And Choice Not Applying Ist Choice Ist Choice Ist Choice 2nd Choice Ist Cho		
PARENT/GUARDIAN IS RESPONSIBLE FOR TRANSPORTATION OF THEIR CHILD/CHILDREN TO AND FROM SCHOOL.		
Once a student receives an approved Intra District Transfer to his/her school of choice, that school will then be considered the student's home school. If a student desires to change schools after being granted an Intra District Transfer, including returning to his/her school of residence, a new transfer request must be submitted and approved before a student will be allowed to change schools. This permit is valid only if the following conditions are maintained: Satisfactory attendance, citizenship and scholarship of the student(s). A permit may be revoked for cause at any time. False or misleading information may be cause for denial or revocation of a permit. Transfer Request will not be processed without Parent/Guardian signature. "I have read and understand the regulations and policies governing intra-district attendance permits and hereby submit my application. I declare under penalty of perjury that the information provided is true and accurate. I understand that all information provided on this form is subject to verification".		
Signature of Parent/Guardian:	Date:	
To be considered for the 2019-2020 school year, this completed form is to be returned between March 1-April 15 to:		
Westside Union School District 41914 N. 50 th Street West, Quartz Hill, CA 93536		
Requests received after April 16, 2019, may not be considered until after the start of the 2019-2020 school year.		
School Use Only As the authorized administrator of the school, I recommend the following action: Request has been denied for the following reason(s): Insufficient space	☐ Approved ☐ Denied ☐ Other,	
Principal	Dated:	
District Use Only As the authorized administrator of the district, I recommend the following action: Request has been denied for the following reason(s): ☐ Insufficient space	☐ Approved ☐ Denied ☐ Other,	
Administrator	Dated:	