

**INTERDISTRICT TRANSFER AGREEMENT/PERMIT**

Date of request: \_\_\_\_\_

\_\_\_ New      \_\_\_ Renewal

**Parent/Guardian completes this section - Use separate form for each child**

Student's Name (Last, First): \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_  
 Current or Last School of Attendance: \_\_\_\_\_ Current or Last District of Attendance: \_\_\_\_\_  
 School of Residence: \_\_\_\_\_ District of Residence: \_\_\_\_\_  
 Preferred School: \_\_\_\_\_ Preferred District: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Phone/Cell number: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Is the student currently expelled or under consideration for expulsion? \_\_\_Yes \_\_\_No

Has the student received special education or other special services? \_\_\_Yes \_\_\_No

If yes, describe: \_\_\_\_\_

Explain the reason(s) for the request for interdistrict transfer (you may attach additional pages): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I declare, under penalty of perjury under the laws of California, that the information provided above is true and accurate. I have read the terms and conditions set forth below and understand the interdistrict transfer regulations and policies for both my district of residence and district of desired attendance. I understand that if approved, this permit is subject to the terms and conditions below and that this permit may be denied or revoked during the school year based on any violation of the terms and conditions set forth below.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TERMS AND CONDITIONS**

- This interdistrict transfer agreement/permit is valid only for the school year granted. The agreement/permit expires at the end of each school year and must be renewed annually.
- This agreement may be revoked at any time by the district of desired attendance for the following reasons:
  - Student is excessively tardy, absent from school, or brought to school excessively early or left excessively late.
  - Student fails to uphold appropriate behavior standards or student has poor academic performance.
  - False or misleading information was provided.
  - Student fails to follow school rules.
  - Other: \_\_\_\_\_
- Approval is subject to space availability in the district of desired attendance and may not be at the requested school site.

<p><b>District of Residence</b>                  School District: <u> Kingsburg Joint Union High School District </u></p> <p>Decision: ___ Approved ___ Denied      Date: _____</p> <p>If denied, reason: _____</p> <p>_____</p> <p style="text-align: center;">Signature – Authorized Representative</p>	<p><b>District of Desired Attendance</b>                  School District: _____</p> <p>Decision: ___ Approved ___ Denied      Date: _____</p> <p>If denied, reason: _____</p> <p>_____</p> <p style="text-align: center;">Signature – Authorized Representative</p>
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\*If denied or no action is taken within 30 days, parent/guardian has the right to appeal to the Fresno County Board of Education within 30 days of the denial date or failure to issue an IDT permit/agreement – (559) 497-3876