

SANTEE SCHOOL DISTRICT
PARENT'S REQUEST FOR INTRADISTRICT ATTENDANCE PERMIT

School of Residence _____

School Year ____ - ____ Grade ____
For which the transfer is requested

School of Desired Attendance _____

Student's Name _____

Date of Birth _____

Home Address _____

City _____

Phone Number _____ School Now Attending or Last Attended _____

Reason for Request _____

Please check any of the following specialized services that your child receives:

- Individualized Education Plan (IEP) _____
- 504 Plan _____
- English as a 2nd Language
- Other _____

CONDITIONS: Students must maintain satisfactory academic effort, behavior, attendance, and be punctual in arriving to class. Parents are responsible for transportation.

I understand this permit is valid only while the above conditions are maintained, and as long as the student's attendance, citizenship and scholarship are satisfactory to the school of attendance. A permit may be revoked for cause at any time. False or misleading information may be cause for denial or revocation.

Parent/Guardian Signature **Date**

If you have any questions regarding this procedure, please call Educational Services at 619-258-2350.

FOR DISTRICT USE ONLY

Approval Denial Reason for Denial _____

Signature

Date

Comments: _____

Distribution: White School of Desired Attendance
 Yellow Parent
 Pink Data Specialists