

School Districts of San Bernardino County  
Redlands Unified School District – 20 West Lugonia Avenue, Redlands, CA 92374

**Application for Interdistrict Attendance Permit**

New Request     Renewal                      School Year \_\_\_\_\_                      Grade \_\_\_\_\_  
 Student Name \_\_\_\_\_ Birth date \_\_\_\_\_                       Male     Female  
 School District of Residence \_\_\_\_\_ School Currently Attending \_\_\_\_\_  
 School District of Desired Attendance \_\_\_\_\_ School Requested \_\_\_\_\_  
 Parent/Guardian Name \_\_\_\_\_ Special Education Student     Yes     No  
 Parent/Guardian Address \_\_\_\_\_ 504 Student     Yes     No  
 City \_\_\_\_\_ Zip \_\_\_\_\_  
 Primary Phone(\_\_\_\_) \_\_\_\_\_ Alternate Phone(\_\_\_\_) \_\_\_\_\_  
 Is student currently under an expulsion order?     Yes     No

**Reason for Request**

- Health Reasons: Attach verification from a licensed physician or clinical psychologist                       To complete current year after moving to another attendance area  
 Pending change of residence this year. Attach a copy of escrow or similar document (90 day limit)                       Other \_\_\_\_\_

Childcare Person/Agency	Employer Information - Father	Employer Information - Mother
Name	Company	Company
Address	Address	Address
City                      Zip	City                      Zip	City                      Zip
Phone	Phone	Phone
Signature of childcare provider: _____		

**TERMS AND CONDITIONS**

It is understood that the parent/guardian must provide home to school to home transportation. **This permit is valid only for the school year granted, while conditions stated are maintained, and as long as the student's attendance, behavior and academic performance are satisfactory to the district of attendance.** False or misleading information may be cause for denial or revocation of a permit. A permit may be revoked for cause at any time. Approval is subject to space availability in the district. **E.C. 46600 Failure to adhere to the above terms/conditions may result in revocation of this permit. Interdistrict attendance permits must be renewed annually.**

I have read and understand the regulations and policies governing interdistrict attendance permits and hereby submit my application. I declare under penalty of perjury that the information provided above is true and accurate. I understand that this form will be provided to the district of residence, the district of desired attendance, and that the information provided is subject to verification.

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

**THIS BOX FOR SCHOOL DISTRICT USE ONLY**

As the authorized administrator for the district of residence, I recommend the following action (check one):

- Approved as long as there is: 1. No fee for service 2. No excess costs 3. No transportation costs  
 Denied Reason \_\_\_\_\_  
 \_\_\_\_\_ Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_

As the authorized administrator of the desired district of attendance, I recommend the following action (check one):

- Approved     Denied    Reason \_\_\_\_\_  
 \_\_\_\_\_ Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_