

DINUBA UNIFIED SCHOOL DISTRICT

1327 E. El Monte Way • Dinuba, CA 93618 • (595-7200)

Interdistrict Attendance Permit

Tulare County

Parents/Guardians: _____

Date _____

___ New ___ Renewal

Name: _____
(please print)

Address/Zip: _____

Home Phone: _____ Work Phone: _____

Name of Pupil(s) (please print)	Date of Birth	Grade in School for year requested

The pupil's District of Residence: _____

I request that above listed pupil(s) be allowed to attend classes in the _____ School District, through the _____ school year. Continuation is subject to good attendance, proper conduct, acceptable grades, and space available.

Reasons for requesting Interdistrict Attendance Permit:

Parent/Guardian Signature

Date

Local School District Action - District of Resident

School District: _____

___ Approved ___ Denied*

Authorized Representative Signature

Title

Date

Local School District Action - District of Attendance

School District: _____

___ Approved ___ Denied*

Authorized Representative Signature

Title

Date

Distribution: White - File Copy Canary - District of Residence Pink - District of Attendance

*In the event of a denial, the appeal should be directed to the Dinuba Board of Trustees, above address.