

Lakeside Union School District
14535 Old River Road
Bakersfield, CA 93311
(661) 836-6658 FAX (661) 836-8059

This is to request an Interdistrict Attendance Agreement for School Year _____:

Name _____ Grade _____ Name _____ Grade _____
Address _____ Zip Code _____ Telephone _____
who lives in the Lakeside Union School District to go to _____ School in the _____ School District.

EXPLANATION FOR REQUEST: (Please attach a separate sheet if necessary).

Parent/Guardian Employment (Attach current paycheck stub to verify employment) (Both Parents(s) Guardian if applicable.)

Mother's Name: _____ Work Hours: _____ Work Days: _____
Name of Employer: _____ Work Address _____
Work Phone: _____ Employer's Signature: _____
Father's Name: _____ Work Hours: _____ Work Days: _____
Name of Employer: _____ Work Address: _____
Work Phone: _____ Employers' Signature: _____

Child Care Provider: (Must Provide Proof of enrollment in Childcare)

This is to verify under penalty of perjury that I, _____ (name of child care provider), am providing daily child care of the student(s) named above. Please provide Child Care Provider address, phone number and signature.
Address: _____ Phone Number: _____
Signature of Child Care Provider: _____

I declare under penalty of perjury that the above information is accurate to the best of my knowledge. I further acknowledge that attendance in a non-resident district is a privilege and not a right. I understand that parent(s)/guardians provide their own transportation to and from approved school. I acknowledge that the district granting this request shall have the right to revoke and end this agreement for any reason. I understand that I have a right to appeal any decision regarding this request by either district to the county board of education pursuant to Education Code Section 46601. I further understand that the Interdistrict Attendance Agreement only covers the school year indicated above. I understand that falsifying this request is grounds for revocation.

Request granted by the governing boards of the school district above name for the school year listed above, subject the following terms:

- a. Parents must provide own transportation. I understand that I will provide to and from school.
- b. District of attendance to receive the average daily attendance for apportionment purposes.

Parent/Guardian Signature _____ Date _____

Request denied by _____ Date _____

District of Residence _____

District of Attendance _____

Agreement Approved _____

Agreement Approved _____

By _____

By _____