

# MORAGA SCHOOL DISTRICT INTERDISTRICT TRANSFER REQUEST



**Step 1: To be completed by parent/guardian**

Requests must include the required documentation to support the reason(s) for the interdistrict transfer request based on the chart on page two. All documentation must be attached to the application at the time of submission. Incomplete applications will not be processed.

School Year for transfer: 20____ - 20____		Date of Request:	
Student Name: (Last, First) <i>Complete a form for each student requesting transfer</i>		Birth Date:	Grade Requested:
Residence Address: <i>(Street, City, Zip)</i>		Gender: Female <input type="checkbox"/> Male <input type="checkbox"/> Non-binary <input type="checkbox"/>	
Current/Last School of Attendance:		Current/Last District of Attendance:	
School of Residence:		District of Residence:	
School Requested:		District Requested:	
Parent/Guardian: <i>First Name, Last Name and Relationship to Student</i>		Parent/Guardian: <i>First Name, Last Name and Relationship to Student</i>	
Main Phone #: ( ) _____ Mobile <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/>		Main Phone #: ( ) _____ Mobile <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/>	
Email:		Email:	
Sibling Name:	School/District:	Grade:	
Sibling Name:	School/District:	Grade:	
Is the student currently pending disciplinary action or under an expulsion order? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Is the student receiving Special Education Services? Yes <input type="checkbox"/> No <input type="checkbox"/> IEP Placement Services ( <i>Please attach plan</i> ): Special Day (SDC) <input type="checkbox"/> Resource (RSP) <input type="checkbox"/> Non-Public School (NPS) <input type="checkbox"/> Currently Pending Special Education Assessment <input type="checkbox"/>			
If the student is receiving support services, please select all that apply. English Learner <input type="checkbox"/> Gifted (GATE) <input type="checkbox"/> General Education with accommodations/modifications <input type="checkbox"/> Section 504 ( <i>Please attach plan</i> ) <input type="checkbox"/>			
Reason(s) for the request? ( <i>Check all that apply. See "Documentation Required" section for required supporting verification</i> ) Child Care (K-8 ONLY) <input type="checkbox"/> Sibling in district <input type="checkbox"/> Health & Safety <input type="checkbox"/> Continuing enrollment <input type="checkbox"/> Parent/Guardian Employment: Complete final year at current school <input type="checkbox"/> Proposed change in residence <input type="checkbox"/> Parent works for the school district <input type="checkbox"/> Other: <input type="checkbox"/> Parent works within district boundaries <input type="checkbox"/>			

I have read the Terms and Conditions on Page 2 and understand the regulations and policies governing interdistrict attendance permits.

**FALSIFICATION OF ANY INFORMATION INVALIDATES THIS TRANSFER APPLICATION**

**Parent/Guardian Signature**

**Date**

*Under penalty of perjury, the information provided above is true and accurate*

**STEP 2: Completed by District of Residence**

Decision: Approved  Denied

If denied, reason:

Authorizing Signature:

Date:

Title:

**STEP 3: Completed by Requested District of Attendance**

Decision: Approved  Denied

If denied, reason:

Authorizing Signature:

Date:

Title:

## Terms and Conditions

- An Interdistrict permit is granted or denied per the terms and conditions stipulated in a district’s board policy.
- I understand that completing this request with the required documentation does not guarantee that the request will be approved.
- I understand Interdistrict Transfer Requests need to be approved by both the resident school district and district of choice.
- Approval by the Requested District is subject to space availability in the district and the district’s capacity to provide special education services, if applicable.
- Approved Interdistrict Transfers allow students to attend the Requested District, but do not guarantee the specific School Requested.
- I understand that transportation must be provided by parent/guardian.
- I understand that Interdistrict transfer requests are only good for one year and must be renewed annually.
- I understand that the Receiving District reserves the right to revoke this agreement for any student whose behavior, attendance, and/or achievement fails to meet the standards of the school of attendance.

Reason for Request	Documentation Required
Child Care <b>(K-8 Only)</b>	<ul style="list-style-type: none"> <li>▪ Letter from the childcare provider, childcare center, or organization providing day care               <ul style="list-style-type: none"> <li>– Name, address and contact information of the childcare provider, childcare center, or organization</li> <li>– Childcare license number</li> <li>– Hours of operation for the center or organization, or the hours the student is under care</li> <li>– Length of time student has been under care by the adult, center or organization</li> </ul> </li> <li>▪ Letter from parent/guardian explaining the circumstance that an interdistrict permit is necessary under childcare reasons</li> </ul>
Parent Employment (If District of Attendance policy permits)	<ul style="list-style-type: none"> <li>▪ Proof of employment of parents/guardians:</li> <li>▪ Copy of a recent pay stub</li> <li>▪ Letter on the employer’s stationary verifying schedule (hours and days) and location of employment</li> <li>▪ If self-employed, letter stating schedule (hours and days) and location of employment</li> <li>▪ Letter from parent/guardian explaining the circumstance that an interdistrict permit is necessary under parent employment reasons</li> </ul>
Sibling	<ul style="list-style-type: none"> <li>▪ Name, grade and school where the sibling(s) attends (sibling must already attend the requested District of Attendance)</li> <li>▪ Copy of sibling’s release permit from the District of Residence or Copy of Report Card</li> </ul>
Health & Safety	<ul style="list-style-type: none"> <li>▪ Letter or report from a doctor, psychologist, or other appropriate person verifying health-related issues (if applicable)</li> <li>▪ Police or school report supporting safety-related issues (if applicable)</li> <li>▪ Documentation of any school meetings addressing safety or health concern (if applicable)</li> <li>▪ Letter from parent/guardian explaining the circumstance that an interdistrict permit is necessary under health and safety reasons</li> </ul>
Specialized Program or Course	<ul style="list-style-type: none"> <li>▪ Copy of the informational brochure, course description, or other material detailing the specialized program in which the student is interested</li> <li>▪ Letter from parent/guardian expressing the extent of the student’s interest in the specialized program, and how the program is either unavailable or not comparable at the District of Residence</li> </ul>
Continuing Enrollment	<ul style="list-style-type: none"> <li>▪ Copy of student’s most current report card and/or transcript showing course of study if the previous release was for specialized program</li> <li>▪ Letter from parent/ guardian stating the enrollment history (grade and school/district) of the student since kindergarten</li> </ul>
Final Year at current school site	<ul style="list-style-type: none"> <li>▪ Copy of student’s most current report card, transcript and discipline report (if applicable)</li> </ul>
Change in Residence	<ul style="list-style-type: none"> <li>▪ Copy of current escrow documents/rental agreements</li> </ul>
Other	<ul style="list-style-type: none"> <li>▪ Current IEP or 504 Plan (If applicable)</li> </ul>