

APPLICATION FOR INTRADISTRICT TRANSFER ELEMENTARY/MIDDLE (TK-8) FOR [REDACTED]

District Office Use Only (Check One)

- Lottery
 - Approved By: _____
School: _____
 - Denied By: _____
- Date: _____

Student's Name (print) _____
Last First Middle Initial

VUSD 9-Digit ID# _____ **Gender** (circle): M F NB **Date of Birth:** _____
(Month/Day/Year)

Student's Current Grade Level: _____ **Student's Grade Level in the 2019-2020 School Year:** _____
(Enter "Pre-School" for brand new 2019-2020 TK/K students, if applicable) (TK/K/1/2/3/4/5/6/7/8)

Desired School(s) for 2019-2020:

First Choice School Second Choice School (if applicable) Third Choice School (if applicable)

Current VUSD School: _____ **School of Residence in 2019-2020:** _____
Name of School ("None" if not currently enrolled in VUSD) Name of School Assigned to Student's Residential Address

Questions:

Is the student's **first choice** desired school for 2019-2020 **the same** as their **current** VUSD School? Yes No

Does the student have a **sibling** who will be enrolled at the **first choice** desired school for 2019-2020? Yes No

If yes, sibling name: _____ Grade in 2019-2020: _____ VUSD 9-Digit ID# _____

Does the student reside with a parent/guardian who is on active duty with the US Armed Forces or who is the spouse of an active duty member of the US Armed Forces? (If yes, military ID must be presented to and verified by VUSD SSS staff.) Yes No

Does the student have a **parent/guardian** who is an employee of VUSD? Yes No

If yes, employee's name: _____ Job Title: _____ Location or Dept: _____

Is the student considered homeless under the McKinny-Vento Act? (See <https://www.cde.ca.gov/sp/hs/homelessdef.asp> for qualifications) Yes No

Is the student in Foster Care or considered a ward of the Court? Yes No

Is the student currently under an expulsion order or has the student been recommended for expulsion? Yes No

Is the student currently or has the student ever been under a School Attendance Review Board (SARB) contract? Yes No

Is the student receiving special education services (on an IEP)? (If yes, a copy of the student's current IEP must be attached.) Yes No

What is your reason for requesting an intradistrict transfer?

Verification SSS Use Only
<input type="checkbox"/> CS
<input type="checkbox"/> SIB
<input type="checkbox"/> MIL
<input type="checkbox"/> EMP
<input type="checkbox"/> HML
<input type="checkbox"/> FOS
<input type="checkbox"/> EXP
<input type="checkbox"/> SRB
<input type="checkbox"/> IEP
<input type="checkbox"/> RSN

By signing below, you acknowledge that you are an educational rights holder for this student, and you understand the following district policies:

The District follows an open enrollment policy regulated by space availability. We have developed a random, unbiased process for student lottery selection. No students will be displaced within their attendance area. (Education Code 35160.5(c), Board Policy and Administrative Regulation 5116.1). **Transportation will not be provided.**

The parent/guardian must submit a completed application to the Student Support Services Dept. at the Vista Unified School District offices.

1. Applications for intradistrict transfer received by **March 15th** shall be eligible to participate in their school of desired attendance lottery.
2. A lottery drawing may be held to establish approval of the application, should applications exceed space available.
3. The parent/guardian will be notified of lottery results.
4. Approval for intradistrict transfers shall remain in place for one school year and shall be renewed automatically unless:
 - The Superintendent or their designee determines that revocation is necessary in the best interests of the student or school district which includes, but is not limited to, situations where the student has unsatisfactory attendance, behavior or academic achievement.
 - The student changes residence.
 - This application contains false or misleading information.

Parent/Guardian _____
Print Name Signature Date

Address _____ City _____ Zip _____
Apt/Unit #

Best Contact Phone # _____ Relationship to Student: _____
Mother, Father, etc.