

**Gridley Unified School District**  
**429 Magnolia Street, Gridley, CA 95948**  
**Telephone: (530) 846-4721 Fax: (530) 846-4595**

ongoing     new

**APPLICATION AND AGREEMENT FOR ATTENDANCE IN ANOTHER DISTRICT**

Name of Student(s) \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_  
\_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_  
\_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_  
Name of Parent \_\_\_\_\_ Home Phone \_\_\_\_\_ Bus. Ph. \_\_\_\_\_  
Residence Address \_\_\_\_\_  
Mailing Address \_\_\_\_\_

Is your student currently expelled, on a suspended expulsion or discipline contract?  Yes  No If yes, explain on separate sheet  
**School Now Attending:** \_\_\_\_\_

Programs in which student participates:  Special Education  
 Other \_\_\_\_\_

**APPLICATION**

I request that my child(ren), named above, be permitted to attend \_\_\_\_\_ School during the \_\_\_\_\_ school year.

Briefly state your reason for this request: \_\_\_\_\_

**AGREEMENT**

In the event this application is approved, I agree and understand that:

1. The above-named student will be transferred back to his/her district of residence if facilities or program become unavailable in the school the student is assigned to attend.
2. Approval may be rescinded if the student demonstrates unsatisfactory attendance, credit accrual or discipline.
3. Falsification or misrepresentation of information on this form constitutes grounds for refusal or cancellation of this request.
4. The parent/guardian assumes responsibility for all transportation for the above-named student(s) to and from school.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Printed Name of Parent/Guardian

\_\_\_\_\_  
Date

**RELEASE/DENIAL OF RELEASE BY DISTRICT OF RESIDENCE**

The above-named student(s) is/are:  released  denied release by the Gridley Unified School District for attendance in the \_\_\_\_\_ School District for the \_\_\_\_\_ school year.

Signed \_\_\_\_\_ Title \_\_\_\_\_ Superintendent \_\_\_\_\_ Date \_\_\_\_\_  
Jordan Reeves

**ACCEPTANCE/DENIAL BY REQUESTED DISTRICT OF ATTENDANCE**

The above-named student(s) is/are  accepted  not accepted by the \_\_\_\_\_ School District  
Student(s) will be enrolled at \_\_\_\_\_ School for the \_\_\_\_\_ school year.

Signed \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

In addition to the conditions stated herein, this attendance agreement is subject to all the terms and conditions of the Interdistrict Attendance Agreement currently in effect between the above District of Residence and the District of Attendance. The District of Attendance is to receive the state apportionment for the Average Daily Attendance accrued in the same manner as if the student were a resident of the District of Attendance. No tuition shall be charged. Revised 06/2019