

*Potter Valley Community Unified School District*

P.O. Box 219

Potter Valley, CA 95469

**REQUEST TO TRANSFER TO ANOTHER DISTRICT FROM PVCUSD**

Date of request: \_\_\_\_\_

The Board of Education of the Potter Valley Community Unified School District of Mendocino County, pursuant to Education Code Section 10801, State of California, hereby agrees to permit the pupil(s) named below to attend \_\_\_\_\_ District for the school year ending June 30, 20\_\_\_\_.

Student name: \_\_\_\_\_ Age: \_\_\_\_\_ Current grade level \_\_\_\_\_

Student name: \_\_\_\_\_ Age: \_\_\_\_\_ Current grade level \_\_\_\_\_

Reason for requesting this transfer:  Child Care Needs  Employment of Parent  Other

Was a request made for the previous school year? \_\_\_\_\_ yes \_\_\_\_\_ no

**TERMS OF AGREEMENT:**

Inter-district transfers must be renewed annually. The District of Attendance will not charge tuition; the average daily attendance shall be credited to the District of Attendance for purposes of determining state apportionments and the revenue limit pursuant to Section 20904 and 20905. Transportation must be provided by parent/guardian or student. As the parent/guardian of the above named student(s), I hereby request that the Potter Valley Community Unified Board of Education approve this transfer request.

Parent/guardian name: \_\_\_\_\_ Daytime telephone #: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Residence address: \_\_\_\_\_

Parent/guardian signature: \_\_\_\_\_ Relationship: \_\_\_\_\_

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**ACCEPTING DISTRICT TO COMPLETE AND RETURN CANARY COPY TO PVCUSD**

Potter Valley Community Unified School District: By: \_\_\_\_\_  
Rick Kale, Superintendent

PVCUSD Board Action: Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_

Accepting District: \_\_\_\_\_ By: \_\_\_\_\_  
Superintendent or Designee

Accepting Board Action: Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_