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 pursuant to Education Code Section 10801, State of C named below to attend year ending June 30, 20	alifornia, hereby	agrees to permit the pupil(s)
Student name:	Age:	Current grade level
Student name:	Age:	Current grade level
Reason for requesting this transfer: Child Care Needs	□ Employme	ent of Parent Other
Was a request made for the previous school year?	yes	no
TERMS OF AGREEMENT: Inter-district transfers must be reviewed annually. The District daily attendance shall be credited to the District of Attendance for revenue limit pursuant to Section 20904 and 20905. Transportat As the parent/guardian of the above named student(s), I hereby request.	purposes of detern on must be provi	nining state apportionments and the ded by parent/guardian or student.
Parent/guardian name:	Daytime telephone #:	
Mailing address:		
Residence address:		
Parent/guardian signature:	Relationship:	
ACCEPTING DISTRICT TO COMPLETE AND R	ETURN CANA	RY COPY TO PVCUSD
Potter Valley Community Unified School District: By:S	uperintendent	
PVCUSD Board Action: Approved: Disapprov	/ed:	Date:
Accepting District: By:	uperintendent or	Designee
Accepting Board Action: Approved: Disappro	ved:	Date: