

**Public School Choice
2014-15 SCHOOL YEAR**



STUDENT LEGAL NAME (Please Print) _____ Birthdate _____

PARENT/GUARDIAN NAME (Please Print) _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

School of Preference (We will do our best to honor this request, but the final decision on the school is up to the district):

School (circle 1) Jason Lee or Lewis and Clark For Grade _____

School Currently Attending _____

REASON FOR TRANSFER

Public School Choice under AYP Sanction

SPECIAL PROGRAMS Any Special Programs required? No Yes (If yes, check all that apply)

Special Education / IEP Section 504 ELL Title I/LAP Other _____

PARENTAL / GUARDIAN AGREEMENT

- Richland School District will provide transportation until the school meets AYP for two consecutive years or receives a waiver from the federal government to no longer impose AYP sanctions.
- I agree to notify the district if at any time, after the first year, I wish to return my child to the attendance area school.

****My signature attests that I have read and understand this agreement and that all information provided is accurate.**

****Until notified by Richland School District Student Services, request is not approved and student must register in home attendance area school.**

PARENT/GUARDIAN SIGNATURE _____ DATE _____

RETURN COMPLETED FORM TO: Special Programs 615 Snow Avenue, Richland, WA 99352
NO LATER THAN 4:00 P.M. AUGUST 30, 2014

FOR DISTRICT USE ONLY

Student will be assigned to the following school for the 2014-2015 School Year

School District _____ School _____

State and Federal Program Coordinator Signature _____ Date _____

RICHLAND SCHOOL DISTRICT BUILDING INPUT Principal has reviewed and recommends: Approval _____ Denial _____

Reason for Denial: No Space Available _____ Special Circumstances _____

Principal / Designee Signature _____ Date _____

RICHLAND SCHOOL DISTRICT DETERMINATION

Request is: Approved _____ Denied _____ Reason(s): _____

Superintendent / Designee Signature _____ Date _____