

Vacaville Unified School District
REQUEST FOR (7-12)
MIDDLE/HIGH SCHOOL
INTRADISTRICT TRANSFER



School Year: 2024 - 2025 Please Complete One Form Per Student
THIS AGREEMENT DOES NOT HAVE TO BE RENEWED ANNUALLY
IT WILL REMAIN IN EFFECT UNLESS SPACE IS NOT AVAILABLE OR CONDITIONS ARE NOT MET

Is your student receiving Special Education services? No Yes If yes, which services (please check one or more): Special Day Class (SDC)
Resource Speech and Language Therapy Other

Student's Name Last First Grade For School Year Requested DOB

Physical Address Street City Zip

Mailing Address (if different)

Parent/Guardian Address (if different)

Parent/Guardian Phone: Primary Secondary Email

School of Residency Requested School

Present School or School Last Attended:

Reason for Request: Sibling(s) concurrently attending (currently attend and will continue) requested school Sibling(s) will be exiting school this year (consecutive enrollment) Moved out of school boundary during current year - would like to continue Moving to the new school boundary area Other

Is your student currently under an expulsion order? No Yes If "Yes", from which school?

ALL BOXES MUST BE CHECKED BELOW FOR APPROVAL OF REQUEST

By submitting this request, I attest that I am the parent or guardian of the student named and I have reviewed the IntraDistrict Transfer Priorities and Practices on the VUSD website and understand that there may not be space or special program at the requested school.

I am aware that space at the residence school will not be held for my student if the IntraDistrict Transfer Request is approved.

By submitting this request, I attest that I understand that my transfer request is not approved unless and until approval notification is received.

Once approved, students agree to remain at the requested school for the duration of the 2024-25 school year.

PROVIDING ANY FALSE INFORMATION ON THIS FORM MAY INVALIDATE THIS REQUEST

Parent/Guardian (Print name)

Parent/Guardian (Signature)

Date

For Requested School Office Use Only

Granted (Special Ed approves first if applicable) Denied due to:

Requested School Principal's Signature Date

Special Ed: Granted Denied due to: Spec Ed Admin. Signature: Date:

IntraDistrict Transfer Requests for Middle and High School students do not have to be approved by the School of Residency. Complete form and submit to the requested school for processing.