



NEW INTER-DISTRICT PERMIT APPLICATION

TO APPLY all three of the following items must be delivered to the Educational Services Department between March 1 – May 31, 2019:

1. An Inter-District Permit Release from your home school district for the 2019-2020 school year.
2. A completed Inter-District Permit Application for RBUSD.
3. A copy of the most recent report card (not applicable for kindergarten students).

*Obtaining a permit from the school district in which you reside does not mandate acceptance by the Redondo Beach Unified School District. Please keep your student enrolled at his/her home school. While it is our goal to notify the parent/guardian prior to the first day of school, RBUSD does reserve the right to make final decisions regarding permit approvals or denials as late as September 2019. When applying for an inter-district permit into RBUSD, you may request **ONE school only.***

SCHOOL REQUESTED TO ATTEND:	GRADE REQUESTED:
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PUBLIC SCHOOL OF RESIDENCE	SCHOOL DISTRICT OF RESIDENCE	CURRENT SCHOOL OR LAST ENROLLED
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TO BE COMPLETED BY PARENT/GUARDIAN HAVING PHYSICAL CUSTODY AND LIVING WITH STUDENT AT THE RESIDENCE BELOW.

STUDENT'S LEGAL LAST NAME	FIRST NAME	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	AGE	BIRTHDATE
RESIDENCE ADDRESS	APT #	CITY	ZIP CODE	
MOTHER/GUARDIAN NAME	PRIMARY PHONE	EMAIL ADDRESS		
FATHER/GUARDIAN NAME	PRIMARY PHONE	EMAIL ADDRESS		

STUDENT LIVES AT THE ABOVE ADDRESS WITH: BOTH PARENTS LEGAL GUARDIAN MOTHER ONLY FATHER ONLY

IS STUDENT ENROLLED IN ENGLISH LANGUAGE DEVELOPMENT (ELD)? NO YES

If yes, what is the primary language? _____

IS STUDENT RECEIVING SPECIAL EDUCATION SERVICES? NO YES (If yes, please attach a copy of your child's current IEP)

IS STUDENT ON A 504 ACCOMMODATION PLAN? NO YES (If yes, please attach a copy of your child's current 504 Plan)

PLEASE CHECK IF APPLICABLE:

- Parent/Guardian is an Employee of Redondo Beach Unified School District (list site location): _____
- Parent/Guardian is an Active-Military Personnel
- Sibling(s) currently attend RBUSD: Student Name: _____ Grade: _____ School: _____
Student Name: _____ Grade: _____ School: _____

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT ALL THE INFORMATION ON THIS FORM IS TRUE AND CORRECT. I UNDERSTAND THE ABOVE INFORMATION MAY BE VERIFIED AT ANY TIME BY THE REDONDO BEACH UNIFIED SCHOOL DISTRICT.

Parent/Guardian Signature: _____ Date: _____