GEORGE S. SZIRAKI, JR. Ed.D.

SUPERINTENDENT

MR. PETER EFSTATHIU
ASSISTANT SUPERINTENDENT
ADMINISTRATIVE SERVICES

MR. JEFFREY TOOKER
DEPUTY SUPERINTENDENT
EDUCATIONAL SERVICES

MR. ERIC VEREYKEN
ASSISTANT SUPERINTENDENT
OF HUMAN RESOURCES

PUHSD Superintendent Signature



13000 NEW AIRPORT ROAD, AUBURN, CA 95603 530-886-4400 FAX: 530-886-4439 www.puhsd.k12.ca.us

Intra-District Transfer Request
Based on Hardship under Board Policy 5116.1
2018-2019

BOARD OF TRUSTEES

LYNN MACDONALD

AREA 1/ COLFAX & FORESTHILL

MAUREEN WARD AREA 2/PLACER

DAVID UNDERWOOD

AREA 3/PLACER

RON OATES AREA 4/DEL ORO

KATHLEEN GEARY AREA 5/DEL ORO

ATTENTION: process begin							out for the request	to be considered. The	
Parent/Guard	ian: (pleas	e print)	<u>)</u>						
Student Name	e						Grade	DOB	
School of ResidenceSchool RequestedSchool Currently Attending									
Parent/s Nam	e								
Address									
Home Phone Work Phone							Cell Phone		
Email Addres	s								
and uncorrectimposition of to participate All Transfers: within Board esto and from the pursuant to est revoked at the behavior. Further (Home Site Ad	trach a cop transfers a table act, c a severe b The Distri- stablished se e school of at ablished pol e conclusion ture reque	are approduction of an of an of an use	roved for, or even the state of	ication. Error hards vent, out ted to any transporta e areas. To n space is fers are va ster if m s to atten	HARDSHIP hip only. A side of the sy curricular ation only for the parent/gu available on alid through the child does at the requestion.	hardship is student's or for co-currice students who hardian will be Board establishe 12th grades not maintainsted school with the 12th grades and maintains	Camily's control, whe cular activity in what reside beyond design the responsible for provious the stude of Lunderstand this in satisfactory gradwill not be automat	ated walking distances, ding daily transportation ent may ride the school bus transfer may be es, attendance, and ically approved.	
regarding thi	s transfer i	request					_	hool site administrator	
Administrator's Signature Date For 10th -12th grades only:									
# Absonacs	Twuchay	# Ela	CDA	Cnadita	Att/Comp	Disciplina	Major Discipline	Data Paviawad	
# Absences Truancy # F's GPA Credits Att/Con Approved, criteria verified						Discipline		oes not meet criteria	

COLFAX HIGH SCHOOL | CONFLUENCE HIGH SCHOOL | DEL ORO HIGH SCHOOL | FORESTHILL HIGH SCHOOL | MAIDU HIGH SCHOOL | PLACER HIGH SCHOOL | PLACER SCHOOL FOR ADULTS

educational programs or school situations which are correctable. Parent or Guardian Statement giving a detailed explanation of the absolute compelling need for their son/daughter to be granted an intra-district transfer: Warning: Do not sign this form if any of the statements above are incorrect, or you will be committing a crime punishable by a fine, imprisonment, or both. This school district investigates all residing statements (Penal code 118, 126, 127). I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and I would so testify under oath, if called to do so. By signing this form I acknowledge that I have read and understand the conditions above. Professional Signature _____ __ Date _____ Parent Signature ____ _ Date ___ Revised 12/7/17

No transfer will be granted for social reason, transportation problem, convenience, athletics,