## Application for Residency Based on Parent/Guardian Employment

Within the Boundaries of the District

In order to be processed by the District, it is mandatory that all of the information on the application form be provided, including the verifying information in Step III. Submit the form ONLY when STEP I, STEP II, and STEP III are completed.

An application must be completed for each child and will be considered separately. Applications will be accepted <u>by mail only</u> to the <u>Palos Verdes Peninsula Unified School District, Superintendent's Office, 375 Via Almar, Palos Verdes Estates, CA 90274-1261.</u>

STEP I: PARENT / GUARDIAN REQUEST (To be completed by School Year:   Current Year   Future Year		Grade Requested	Date of Request	
Student Name (Last, First)		Birth Date	Gender  ☐ Male ☐ Female	
Current or Last School of Attendance		Current or Last Distri	Current or Last District of Attendance	
School of Residence		District of Residence	District of Residence	
School Requested		District Requested	District Requested	
Parent/Guardian Name		Contact Number:	Contact Number: ☐ Home ☐ Work ☐ Cell	
Email Address		Contact Number:	Contact Number: ☐ Home ☐ Work ☐ Cell	
ddress		City/Zip	City/Zip	
<ul> <li>Does the student have a current Individualized Education Prog</li> <li>Does the student have an inactive or expired IEP? ☐ Yes ☐</li> <li>Does the student have a current 504 Plan? ☐ Yes ☐ No</li> <li>If the answer to any of the above questions is "Yes," please attach a</li> <li>During the preceding three (3) school years (e.g., 2006-07, 2007-08, 20</li> <li>reason? ☐ No ☐ Yes When: (Month/year)Offense:_</li> </ul>	□ No  copy of the student's latest IEP or 08-09) or the current year, has the	requesting student been ex	•	
Terms of Expulsion:	School of Attend	Jance		
Terms and Conditions  The District requires the parent/guardian to verify employment within the District boun providing the verification documentation at a minimum on an annual basis.  In requesting enrollment, I agree to notify the Palos Verdes Peninsula Unified Schoi immediately of any change in the employment information contained in Step III herein,	where there is space ava of District school or class. agree to • For all students enrolle	that the District will place the studer ilable, which may result in the student ad, Miraleste Intermediate School	nt not being placed in my choic shall be deemed the stude	
provide transportation of the student to and from school, and also agree to provide/ar supervision of the student before and after school hours.  In addition, I understand that there is no sibling preference for enrollment in the District parent/guardian employment within the boundaries of the District.  No admission will be permitted in any school year after the last day of the first semester.  Applicants who cannot be enrolled in the initial enrollment period, and later received applicate be kept on a waiting list for the current school year in the order in which the applicative received by the District, until there is an opening for the applicant or the period for enrollosed for the current year  In addition, I understand that enrollment of the above-named student in the requested programs is on a space-available basis.	range for intermediate school of re initially enrolled hereunde what elementary school the student participates Federation (CIF), he/she should check the CIF rule ons were ollment is this agreement.  • A permit may be denied of False or misleading.	sidence for District purposes, withor during elementary school or interm	ut regard to whether the studer ediate school and without regard d by the California Interscholat the new school. Parent/guard dence for services rendered un g reasons:	
ave read the terms and conditions and understand the regulation ployment within the boundaries of the District and hereby submit my e and correct. I understand that the information provided is subject to	application. I declare under pena	ications for residency ba Ity of perjury that the infor	ased on parent/guardia mation provided above	
Parent/Guardian Signature:	Relationship	to Student:		
STEP IV Proposed District of Attendance	STEP V: District of R			
Decision: ☐ Approved ☐ Denied	Decision: ☐ Appro	ved □ Denied		
PVPUSD School & Program Assignment:	Authorizing Signature:	Authorizing Signature:		
Authorizing Signature:	Title:			