

SAN BERNARDINO COUNTY SUPERINTENDENT OF SCHOOLS

TO: San Bernardino County Board of Education
601 North E Street
San Bernardino, CA 92415-3093 (909)
386-2755 FAX (909) 888-1235

Attn: Dr. Don English
Director, Children Deserve Success

Inter-district Attendance Appeal and Request for Hearing

(Please print or type all materials except signature.)

In accordance with Education Code Section 46601 and San Bernardino county Board of Education Policy 150, we hereby request a hearing for the purpose of an Inter-district Attendance Appeal:

Name of Pupil _____
Date of Birth

Street Address City Zip Code _____
Grade

Name of Parents/Guardian _____
Telephone Number

School District of Desired Attendance _____
School of Desired Attendance

School District Which Denied Request (*Attach copy of denial*) _____
Date of Denial

Is the child currently enrolled in special education classes? Yes No

If yes, date of last I.E.P. Meeting _____

Have you had the opportunity or appeared before the local school district governing board which denied your request? Yes No

If yes, date of appearance: _____

Is the student currently under an expulsion order from a school district? Yes No



**San Bernardino County Superintendent of Schools
Inter-District Transfer Appeals
Reason for Appeal**

The Education Code is silent as to the grounds to be considered by the County Board in granting an inter-district transfer. The County Board has adopted the following grounds to which an appeal request may only be considered:

1. Whether there was an abuse of discretion by the local school board in denying the request and such abuse of discretion was prejudicial;
2. Whether the decision was fair;
3. Whether there is newly discovered evidence or newly discovered grounds for the request which could not have been produced at the district level or which were improperly not considered by the district in denying the request.

In the spaces provided below, please state your reason for requesting an appeal based upon the County Board’s grounds for appeal (You may attach additional information if necessary.)

Will you require an interpreter? Yes No

If yes, what language? _____

I hereby certify this information is true and correct to the best of my knowledge.

Parent/Guardian Signature

Date