## Tuolumne County School Districts ALLEN BILL ENROLLENT INFORMATION FORM

This form is for the	School Year to establish residency in the	School District	
This form is u	used to establish residency based on parent/guardian employment in a school di There is no annual renewal required once accepted Parents/Guardians assume all responsibility for transportation	strict	
Pupil's Name:	Birthdate: Incomi	ng Grade:	
Parent/Guardian's Name:	Phone(s):	Phone(s):	
Address:			
Mailing Address (if different):			
District of Residence:			
Work Information:			
Name of Employer:	Phone:		
Address:	City:	Zip	

List any Special Education Services (i.e., Special Day Class, Resource Specialist, Speech, APE, etc.) your child qualifies for and attach current IEP. *Per California Education Code 48204(b)(3), a school district may prohibit the transfer of a pupil if the district determines that the additional cost of educating the pupil would exceed the amount of additional state aide received as a result of the transfer.* 

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BY MY SIGNATURE BELOW, I certify that to the best of my knowledge the information provided in this form is true and correct.

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Parent/Guardian Signature			Date	
		For Office Use Only		
Enrollment Request:	Accepted Denied Reason(s) for denial:_			
Authorized Signature,	Title		Date	
Original-District of Att	endance	Copy-District of Residence	Copy-Parent/Gaurdian	