



Sulphur Springs Union School District Intra-District Attendance Form

27000 Weyerhaeuser Way Santa Clarita, Ca 91351
Ph: 661-252-5131 Fax: 661-252-3589
www.sssd.k12.ca.us

Please submit the completed form to the school site or the District Office.
If you need assistance please contact Pupil Services at 661-252-5131.

NOTE TO PARENTS: Transportation is the responsibility of the parent. The Intra-District Attendance Agreement is in effect for the duration of the student's elementary years in the District. Under [Board Policy 5116.1](#) and [Regulation 5116.1](#)

This Application is for the 20____ - 20____ school year in Grade Level _____

Student Name _____

Date of Birth: _____

Address _____

Please indicate the reason for the transfer request: ☐ Parent Choice ☐ Address Change ☐ Sibling currently enrolled Name: _____ ☐ Parent Employed at requested school

School of Residence _____

Last School Attended _____

School You Wish to Attend First Choice _____ Second Choice _____

Does the student have an IEP? ☐ No ☐ Yes *If yes, please attach recent IEP*

The Special Education Department must approve Special Education Students before the transfer can be approved.

For Special Education Department Use Only

Please indicate Special Education Services: ☐ SDC ☐ RSP ☐ Speech Language ☐ Other: _____

Can the student's needs be met at the site requested (see above): ☐ Yes ☐ No

If NO, specify: _____

Reviewed by _____

Parent Name _____

Parent Signature _____

Phone Number _____

Email _____

Pupil Services Use Only

☐ Added to cohort numbers ☐ Already in enrollment numbers at the site

This Intra-District Attendance Application has been ☐ **Approved** ☐ **Denied** **due to** ☐ Capacity Limits
☐ Attendance Concerns
☐ Behavioral Concerns

Pupil Services

Date