

**\*\*Deadline to apply, January 25, 2010\*\***

**Date Elementary**

**FONTANA UNIFIED SCHOOL DISTRICT  
TITLE I PARENTAL CHOICE TRANSFER OPTION FOR ELEMENTARY**

APPLICATIONS WILL BE ACCEPTED AT SCHOOL SITES **ONLY** DURING PARENTAL CHOICE ENROLLMENT

**STUDENT INFORMATION (PRINT ALL INFORMATION / ONE FORM PER STUDENT)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Current School: \_\_\_\_\_ Spec. Ed \_\_\_\_\_ Grade in 09-10 \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_ Student No: \_\_\_\_\_

Contact Numbers: Hm: ( ) \_\_\_\_\_ Work: ( ) \_\_\_\_\_ Msg: ( ) \_\_\_\_\_

**REQUEST OF PARENT/GUARDIAN (please  one and return signed form to your child's school)**

- I have been informed of my choices and do not want to participate in the School Choice Transfer Option.
- I do request that my child be permitted to attend **(please circle one)**

**Dorothy Grant Elementary OR Oleander Elementary**

**CONDITIONS**

I understand that the district will pay the transportation cost. Once the home school is no longer required to provide School Choice, I may keep my child at the Choice School, but I will then be responsible for transportation costs.

I understand and agree to the conditions of the permit stated above, if approved. This application is not valid without all signatures from the Fontana Unified School District Office of Child Welfare and Attendance and upon receipt of Title I verification.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

**FOR DISTRICT USE ONLY**

The above named student is \_\_\_\_\_ **Accepted** \_\_\_\_\_ **Denied** for attendance at the requested school. If accepted this permit is valid as long as the student remains at the school requested and all conditions are met.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Coordinator, Child Welfare & Attendance

TITLE I Status Verified: \_\_\_\_\_  
Date

By: \_\_\_\_\_  
Title I Verification Signature