



# CAMBRIAN SCHOOL DISTRICT

## REQUEST FOR CHARTER TRANSFER PERMIT

4115 Jacksol Drive • San Jose, CA 95124 • 408-377-2103 • Fax 408-559-3122

*This form is used for current Cambrian Students who have moved outside of the Cambrian School District Boundaries and wish to continue to attend school in the Cambrian School District.*

<b>District of Residence:</b>	<b>School Year:</b>
-------------------------------	---------------------

School you are requesting:

Fammatre Elementary  
  Farnham Elementary  
  Sartorette Elementary  
  Price Middle  
 Sibling currently attending school requested                     
  Cambrian Employee

### STUDENT INFORMATION

Student's Legal Name: \_\_\_\_\_  
(As it appears on birth certificate)                      LAST,                      FIRST                      MIDDLE INITIAL

Date of Birth: \_\_\_\_\_ Circle Grade Level Entering:    **TK   K   1   2   3   4   5   6   7   8**

Residence Address: \_\_\_\_\_

Best number to be reached at: \_\_\_\_\_ Best email to be reached at: \_\_\_\_\_

Does your student receive special services?    No    Yes

### INFORMATION

A Change of Address Form and three (3) documents for Proof of Residence must accompany this request. See Change of Address Form for Proof of Residence requirements.

### PARENT/GUARDIAN STATEMENT

In making this request, I understand the following conditions: 1) approval by Cambrian School District is required; 2) if approved, the student and parent/guardian will be expected to cooperate with school personnel; 3) if approved, the parent/guardian will be responsible for the student's transportation to and from school; and 4) initial requests may be denied for capacity consideration of a program, class, grade level, or school building; 5) Cambrian Charter status does NOT guarantee enrollment into the Campbell Union High School District.

I hereby certify that the student and parent/guardian information provided above is accurate and that I understand and agree to the above stated conditions. Falsification of information invalidates this request.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Note:** Cambrian School District accepts new Charter students as space allows. If there are more students requesting Charter Transfer Permits than space available, a priority list and lottery system will determine the order in which students will be admitted. Parents or Guardians requesting Charter transfers should enroll their students in their neighborhood school in the event the number of Charter applications exceeds the Cambrian School District's capacity. Please contact your district of residence for enrollment instructions.

Cambrian School District office use only: Approved  Denied

Reason(s) for denial: \_\_\_\_\_

Lottery Number (If Needed): \_\_\_\_\_ Wait List Order Number (if Needed): \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_