

## SONORA SCHOOL DISTRICT

830 GREENLEY ROAD, SONORA, CA 95370 TEL (209) 532-5491 FAX (209) 532-4828

Cheryl Griffiths, Superintendent

cgriffiths@sesk12.org

## STUDENT INTERDISTRICT ATTENDANCE CONTRACT

Date:	<u></u>
Pursuant to child	the provisions of Board Policy 5117 and Administrative Regulation 5117, my  (If more than one child, complete a
District by Superintend	ntract for each child) has been granted the privilege to attend Sonora School wirtue of an interdistrict attendance permit. I understand and agree that the dent or his or her designee may revoke during the school year my son or attendance at Sonora School District pursuant to the interdistrict attendance
permit upor Superintend	n the occurrence of one of the events listed below. I also understand that the lent or his or her designee can revoke my son or daughter's attendance at Sonora
	rict during the middle of a school year even if I have other children attending interdistrict attendance permits.
1.	The student does not maintain a 95% attendance rate, and has more than 3 unexcused absences per school year or is excessively tardy;
2.	The student is brought to school excessively early, late, or is regularly not picked up on time after school by the parent or designee;
3.	The student does not demonstrate satisfactory academic effort, maintain a 2.0 GPA, or progress appropriate to ability;
4.	The student fails to observe all school rules and cooperate with teachers/staff, or causes disruption either in the classroom or outside of class;
5.	The student is recommended for expulsion; OR
6.	If it is determined that information provided to support an ITP application is inaccurate, invalid, falsified, or no longer applies.
and from s following	and agree that it is my responsibility to provide transportation for my child to school. I understand and agree that my child is to be picked up from school the dismissal from class no later than p.m. unless under the direct n of a teacher for a specified reason (athletics, band, etc.)
	d and agree that the District may place my son or daughter in a particular class District at its discretion, and that the District may make this placement after

consideration of the availability of space in a class.

I understand and agree that I must annually renew my interdistrict attendance permit.

I understand and agree that the failure of me, my son or daughter to abide and follow these conditions on a daily basis may result in the unilateral recession of the interdistrict attendance permit during the middle of the school year for which the permit was approved and necessitate my child returning to the district of his or her residence.

I understand that I do not have the right to appeal to the Board of Trustees the Superintendent's decision to revoke my son or daughter's interdistrict attendance permit.

Signed:		Date:
	(Student)	
C: 1.		Deter
Signed: _	(Parent/Guardian/Caregiver)	_ Date:
Signed: _		_ Date:
	(Parent/Guardian/Caregiver)	
Signed: _		_ Date:
	(Superintendent/Superintendent's Designee)	