



Charter Oak Unified School District

Learn Today * Lead Tomorrow

Department of Student Services

20350 E. Cienega Ave · Covina · California · 91724 · Phone: 626/966-8331, Ext. 90556



2020-21 DISTRICT OF CHOICE TRANSFER APPLICATION

▶ A **separate application** must be submitted for **EACH** Child) ◀

ATTENTION: We are **unable to accept ANY** applications for **ANY** grade from **Azusa, Pomona or Rowland USDs.**

In accordance with Charter Oak Unified School District policy, applications **must be received** at our Department of Student Services Office **between October 21, 2019 and December 16, 2019.**
DUPLICATE, INCOMPLETE AND APPLICATIONS RECEIVED OR POSTMARKED AFTER DECEMBER 16, 2019 WILL NOT BE PROCESSED – NO EXCEPTIONS.

Application for: _____ M: F: _____ / _____ / _____
First Name Last Name Date of Birth: (Mon/Day/Yr)

Name of School your child is **currently** attending: _____

Transfer request **FROM:** _____ District
SCHOOL DISTRICT NAME (school district where you **currently reside**)

COUSD Schools Requested: (1st Choice) _____ (2nd Choice) _____

Please Note: This is **only a request.** The Governing Board of the School District is responsible for determining the number of transfers the district is willing to accept and for ensuring that students admitted are selected through a random, unbiased process. **Placement at a school site is determined by space availability, and may be changed by the district up until September 11, 2020.** THE DISTRICT IS NOT REQUIRED TO ADMIT A STUDENT TO A SPECIFIC SCHOOL OR PROGRAM. THERE ARE NO GUARANTEES ON ANY SCHOOL SITE ASSIGNMENT.

For the **2020-21** school year, my child will be **entering** grade (please circle one): **TK* K** 1 2 3 4 5 6 7 8 9 10 11 12**
(*TK: the student will turn 5 on or between 9/2/20 and 12/2/20) (**K: the student will turn 5 on or before 9/1/2020)

Does this child currently attend school in the Charter Oak Unified School District? Yes: _____ No: _____

If Yes, name of COUSD school currently attending: _____

If this child has any siblings **currently** (2019-20 school year) attending school in the Charter Oak Unified School District, please list:

Sibling Name: _____ 2019-20 Grade: _____ School: _____

Sibling Name: _____ 2019-20 Grade: _____ School: _____

If you are submitting a 2020-2021 District of Choice application for more than one child, please list the name(s) of the other sibling(s), the grade he/she will be entering, and the school site requested:

Sibling Name: _____ 2020-2021 Grade: _____ Requested School: _____

Sibling Name: _____ 2020-2021 Grade: _____ Requested School: _____

Is a parent of applicant currently serving in the U.S. military? Yes: ___ No: ___ Is applicant **currently** enrolled in free & reduced lunch pgm? Yes ___ No: ___

Note: Information on this application must be current and your signature indicates you understand that your child may be placed at any one of the schools within the Charter Oak Unified School District. Applications will be signed by the District Representative (below), and a copy returned to you for verification. If the number of applications received exceeds space availability, a lottery will be held on January 16, 2020.

Parent/Guardian Name (PLEASE PRINT) _____ Parent/Guardian Signature _____

Unit/Apt. #: _____
Home Address (Number & Street - PLEASE PRINT) _____ City (PLEASE PRINT) _____ Zip Code _____

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Email Home Phone Number Work Phone Number Cell Phone Number

↓ Charter Oak Unified School District Completes Portion Below This Line: ↓

Your 2020-2021 District of Choice Transfer Request _____ is approved _____ is not approved, providing the student meets the admission requirements of the school/district.

Note: The district of residence may prohibit a transfer out if: (1) the transfer would negatively impact either a court-ordered or voluntary desegregation plan or the racial and ethnic balance of the district; or (2) the district has set a limit on the number of students that may transfer out of the district pursuant to Education Code Section 48209.7. District of residence has no specified timeline by which it must act to deny a transfer.

Maria Thompson, Director of Student Services Date: _____