

ISLAND UNION ELEMENTARY SCHOOL DISTRICT
7799 21ST AVENUE
LEMOORE, CA 93245

2018 – 2019 Charter Request to Attend Island School

*PLEASE NOTE: Due to our facility being at maximum capacity, we cannot guarantee future siblings being accepted into our program upon initial request. All charter requests are reviewed annually to determine space and eligibility.

Student Name(s) _____ Entering Grade _____ Birth date _____ District of Residence _____

Current School: _____

Student qualifies for special services as marked below:

Bilingual Special Day (SDC) RSP Speech

Parents/Legal Guardian: _____

Address _____

City/Zip _____ Hm Phone _____ Cell Phone _____

Returning

Employment – Place of employment: _____

*If your place of Employment lies within the Island District please provide the address and number of hours worked per week.
Address _____ Hours per week _____

Hardship – Please attach explanation of special circumstance.

Other – Please attach specific reasons.

Has your child been expelled from school or is he/she facing expulsion?

No Yes - If yes, please explain on back of page.

I declare under penalty of perjury under the laws of the State of California that the information I have provided is true and correct. I understand that IUSD may request student behavior, attendance, and any pertinent information from my child's previous school.

Parent/Guardian Signature

Date

For Office Use Only

Superintendent's Recommendation:

Approve (To Be Renewed Annually) Deny

Board Date _____

Superintendent's Signature

Date