



**Board of Trustees**  
Kima Hayuk  
Roxana Hui  
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Jacque McLaughlin  
Karen Lentz

**Superintendent**  
Ronan Colver

Dear Parent/Guardian:

The Brisbane School District understands that it is sometimes necessary for parents/guardians to enroll children outside of their district of residency. In order to facilitate your request for an Interdistrict Transfer Agreement to another district, we ask that you complete the enclosed form and attach proof of residency. Residency requirements can be met by submitting the following items:

1. a copy of the current driver's license or ID card for one of the parents/guardians AND
2. any two of the following documents:
  - a current mortgage statement, property tax bill, or notarized lease agreement;
  - the current PG&E bill and one other recent utility bill (dated within 45 days)
  - recent (within 45 days) correspondence from a government agency
  - current auto registration and auto insurance statement

Be sure to include information about special education programs (speech, resource, special day class, etc.) in which your child may be enrolled. Assessments or testing for special education purposes may not be done without the prior notification and approval of the Brisbane School District.

Please note that approval of interdistrict transfers is not guaranteed. Furthermore, once approved by the Brisbane School District, the Agreement must still be approved by the district of attendance.

Interdistrict Transfer Agreements are valid for one school year only and must be renewed annually. Each district has its own deadlines for the enrollment of students. It is your responsibility to ensure that you meet the deadline for the district in which you intend to enroll your child.

Should you have any questions, please contact me by phone at 1-415-467-0550 or by email to [rberania@brisbanesd.org](mailto:rberania@brisbanesd.org).

Sincerely,  
Rachell Berania  
Administrative Associate



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## Interdistrict Transfer Agreement for the 2017-2018 School Year

The Governing Board of the Brisbane School District of San Mateo County and the district named below do hereby agree to permit the pupil named herein, while residing in the Brisbane School District, to attend the school named below during the school year ending June 30, 2018, subject to the specific terms and conditions of Education Code Section 46600 at No Cost to the District of Residence.

Name of Requested School: \_\_\_\_\_

District of Requested School: \_\_\_\_\_

This is a (check one)     NEW Request for this School or District     RENEWAL of an existing agreement

Student's Name \_\_\_\_\_ Grade in 2017-18 \_\_\_\_\_

Address \_\_\_\_\_

Name of Parent(s) or Guardian(s) \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Telephone Number \_\_\_\_\_ Daytime Phone Number \_\_\_\_\_

Reason for Requested Transfer \_\_\_\_\_

This student receives the following services (check one or more):

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Physical or Occupational Therapy | <input type="checkbox"/> Resource (RSP) | <input type="checkbox"/> Speech/Hearing-Impaired Services |
| <input type="checkbox"/> Special Day Class                | <input type="checkbox"/> Other _____    | <input type="checkbox"/> NO Special Education Services    |

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

**NOTE: This Agreement covers only the current school year. You must reapply annually.**

The District of Attendance reserves the right to revoke this agreement for any individual student whose grades, citizenship, and/or attendance fails to meet district standards. If this student requires new or additional special education services, or change in service, subsequent to approval below, Brisbane School District must be informed prior to the IEP and this agreement will be reviewed and may need to be revoked. Parents/guardians have a right to appeal to the Governing Board of either school district if this form is not approved.

<p style="text-align: center;">Brisbane School District</p> <p style="text-align: center;"> <input checked="" type="radio"/> <b>Approved</b>      <input type="radio"/> <b>Denied</b> </p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Ronan Collver, SUPERINTENDENT</p> <p>DATE _____</p>	<p style="text-align: center;">District of Attendance</p> <p style="text-align: center;"> <input type="radio"/> <b>Approved</b>      <input type="radio"/> <b>Denied</b> </p> <p style="text-align: center;">_____</p> <p style="text-align: center;">SIGNATURE &amp; TITLE</p> <p>DATE _____</p>
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**Please return one copy of this form to the Brisbane School District office at 1 Solano Street, Brisbane, CA 94005.**