309 North Rios, Avenue · Solana Beach · CA 92075

## **Intradistrict Open Enrollment Permit**

The Solana Beach School District maintains a policy supporting intradistrict open enrollment. Enrollment in a school of choice will be determined by lot, based upon anticipated available space for the coming school year. Every effort will be made to accommodate students in the special programs of their choice (bilingual, special alternative, global education) with placements being finalized prior to the beginning of the school year. Other intradistrict transfers will be determined by the end of the second week of school. **Every effort will be made to place students before the school year begins.** In the meantime, a student must attend his or her neighborhood school until it can be determined that there is available space for placement in the school of choice. Intradistrict attendance permits are valid only during the school year for which they are issued, and must be approved before a student may transfer schools.

## **Open Enrollment Guidelines:**

- 1) Availability of space (based upon student/teacher ratios)
- 2) Maintenance of racial/ethnic balance at all district sites
- 3) Special program enrollment (i.e., bilingual, global education, special alternative, etc.)
- 4) Returning students
- 5) Siblings of currently enrolled students
- 6) Extenuating circumstances of a personal or family nature
- 7) Senior Student

Enrollment in a school of choice will be determined by lot from the eligible applicant pool and a waiting list will be established, indicating the order in which students may be accepted as openings occur.

**Application Procedure:** (a) Parent/guardian completes Section A and submits application to the District Office; (b) Superintendent approves or disapproves; (c) Notification of approval/disapproval sent to schools and parent/guardian. For inquiries, please call Pupil Services at the District Office, 794-7124.

SECTION A: To Be Completed By Parent/Guardian

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Present School of Res	sidence		
School of Desired Atte	endance		
Pupil's Name			Grade
	Last	First	
Pupil's Address	Street	City	Zip
Mailing Address (if different)		·	·
	Street	City	Zip
Telephone Home		Work	
Reason For Request			
I understand that if t	his request is approved, transportation wil	l not be provided:	
Name of Parent/Guard	dian (please print)		
Signature of Parent/G	uardian		
			Date
SECTION B: To Be Co	mpleted By Superintendent/Designee	Date Received	
Approved			
Disapproved	d		
Signature		Date	
Comments			