

Child Welfare and Attendance 13451 N. Extension Road Lodi, CA 95242 Phone: (209) 331.7055

Open Enrollment / Intra-District Appeal Form

Appeal Information: If you do *not* agree with the transfer request decision, you may appeal the denial. To protect your appeal rights, you must follow the instructions described in each step listed below. If you do not respond by the required timeline (10 days after receipt of denial notice) or fail to submit the required appeal information with your appeal request, your appeal will not be considered. The decision of the Coordinator of Child Welfare and Attendance Office regarding any appealed Intra-District Transfer Application shall be final and binding.

No appeals will be accepted for Late Transfer requests.

STEP 1:	Complete the appeal information and attach a copy of your transfer request denial notice.				
STEP 2:	Deliver to the CWA Office by		(Date).		
STEP 3:	A written response will be mailed no longer than 10 business days after submission.				
Student Nam	е		Student ID#		
School of Residence			Grade		
Name of Parent/Guardian			Telephone No.	Telephone No.	
Address		City		Zip	
	sidence to attend the requested is necessary.	SCHOOL ALLACH		Supporting	

In the space below, please state	your understanding of why you	r Intra-District Permit Requ	est was denied.
Check Box: If an Interpreter Needed:			
Language Spoken:	Signature of Parent/Guardian		 Date
	APPEAL PROCES	<u>s</u>	
	plication Transfer denial on new a		
	his document to the Child Welfare a wed by the Assistant Superintender		10 days of the denia
Ψ,		e. e. e. g. e e.	
	Child Welfare and Atte	endance	
	13451 N. Extension R		
	Lodi, CA 95242	Noau	
	209.331.7055		
	209.331.7033		
Intro District Assessment Assess	Dete Deseive de		
Intra-District Agreement Appea	Date Received:		Elementary Secondary
☐ Granted	Date:	Reviewed by:	-
□ Granted □ Denied	Date.	iteviewed by.	