Mountain View School District INTRA-DISTRICT PERMIT APPLICATION

Student Last Name:	First Name:	Middle Name:	
Birth Date:	Grade: School o	of Residence:	_
Home Address:		City:	_
Parent/Guardian Last Name:	Fi	rst Name:	_
Phone Home:	Work:	Other:	_
School Desired:			_
☐ Academic Adjustment☐ Behavioral Adjustment☐ Completion of the current	provide utility bill from chil Documentation recei Documentation recei	d care provider) ved: ved:	
child's behavior or attendance is u determined to be false or inaccura school of residence. Permits are s enrollment exceeds maximum cla	CH 504 OTHER erstand that satisfactory be insatisfactory and/or informate, the permit will be revolubject to cancellation at arms size. I understand that p	chavior and attendance are required. If my nation presented by the parent/guardian is ked and the student will return to their	S
Parent/Guardian Name	 Signat	ure Date	_
FOR OFFICE USE ONLY NEW RENEW CURRENTLY ENROLLED OTHER	ACTION TAKEN ACCEPTED DENIED REASON FOR DENIAL CONDITIONAL SCHOOL ADM SIGNATURE (LEAVING): SCHOOL ADM SIGNATURE (RECEIVING): DIRECTOR OF PPS SIGNATURE:		

White: Pupil Personnel Canary: Parent Pink: School of Attendance 8/19 dr

ANY QUESTIONS REGARDING THIS PERMIT PLEASE CALL PUPIL PERSONNEL OFFICE AT (626) 652-4982