



"Where education meets the flight of reality"

44811 SIERRA HIGHWAY, LANCASTER, CALIFORNIA 93534-3226

Phone (661) 729-2321 / Fax (661) 949-6292

**Application for Change of Placement - 2011/2012**

PRESENT SCHOOL	PRESENT PROGRAM	REQUESTED PROGRAM	REQUESTED SCHOOL
<b>Check One</b>	<b>Check One</b>	<b>Check One</b>	<b>Check One</b>
<input type="checkbox"/> Antelope Valley <input type="checkbox"/> Quartz Hill	<input type="checkbox"/> Home Study	<input type="checkbox"/> Home Study	<input type="checkbox"/> Antelope Valley <input type="checkbox"/> Quartz Hill
<input type="checkbox"/> Eastside <input type="checkbox"/> Phoenix /Lancaster	<input type="checkbox"/> Independent Study	<input type="checkbox"/> Independent Study*	<input type="checkbox"/> Eastside <input type="checkbox"/> Phoenix /Lancaster
<input type="checkbox"/> Highland <input type="checkbox"/> Phoenix /Palmdale	<input type="checkbox"/> CDS (Community Day School)	<input type="checkbox"/> CDS (Community Day School)	<input type="checkbox"/> Highland <input type="checkbox"/> Phoenix/Palmdale
<input type="checkbox"/> Knight <input type="checkbox"/> R. Rex Parris	<input type="checkbox"/> SOAR	<input type="checkbox"/> SOAR (GRADE 9 ONLY)	<input type="checkbox"/> Knight <input type="checkbox"/> R. Rex Parris
<input type="checkbox"/> Littlerock <input type="checkbox"/> Desert Winds	<input type="checkbox"/> OSC (On Site Continuation)	<input type="checkbox"/> OSC (On Site Continuation)	<input type="checkbox"/> Littlerock <input type="checkbox"/> Desert Winds
<input type="checkbox"/> Lancaster <input type="checkbox"/> Desert Winds	<input type="checkbox"/> OMP (Mandatory Placement)	<input type="checkbox"/> OMP (Mandatory Placement)	<input type="checkbox"/> Lancaster <input type="checkbox"/> 5 <sup>th</sup> year Senior (OL)
<input type="checkbox"/> Palmdale    West Valley	*NOTE: If this is an application for Independent Study, I am agreeing that I have been advised regarding other appropriate educational options. In lieu of these programs, I have freely chosen to enroll in the District's Independent Study Program. <b>Parent/Student Initial:</b> _____		<input type="checkbox"/> Palmdale <input type="checkbox"/> 5 <sup>th</sup> year Senior (IS)
<input type="checkbox"/> Other:			<input type="checkbox"/> Other:

**School assignment is contingent upon proof of residence in the attendance area of the requested school.**

**Does Student have an IEP or 504 Plan?**     NO     YES (If YES - Please attach copy of IEP and indicate program below)

ED /  RSP /  SDC /  IEP Attached     504 /  504 Plan Attached /  ELL

STUDENT INFORMATION			
STUDENT NAME:	<input type="checkbox"/> Male <input type="checkbox"/> Female	DATE OF APPLICATION:	
STUDENT #:	DOB:	AGE:	GRADE:
PARENT/GUARDIAN:	Is Student a Foster Child? <input type="checkbox"/> YES <input type="checkbox"/> NO		TOTAL CREDITS EARNED:
ADDRESS:	CITY:	ZIP:	
HOME PHONE:	WORK PHONE:	CELL PHONE / OTHER:	
Is the student currently on probation? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, probation officer's name & phone number:		
Has the student been expelled? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, from what school district was the student expelled:	Date of Expulsion:	
Please list all Schools, Camps, and Juvenile Halls attended. → → →	Prior Schools	City/State	Prior Schools
	1.		3.
	2.		4.

**REASON FOR REQUEST / NOTES:**

STUDENT SIGNATURE _____	PARENT SIGNATURE _____
COUNSELOR SIGNATURE: _____	ADMIN. SIGNATURE _____

Authorization for Release of Records and Consultation	Office Use Only:
<p>I, _____, the legal parent/guardian of the (Please Print) above student, authorize release of transcripts, confidential medical, psychological, educational evaluation(s) or expulsion records to the AVUHSD. I authorize AVUHSD to consult with staff at my child's previous school in order to facilitate my child's change of placement.</p> <p>Parent/Guardian Signature: _____</p>	<p>DISPOSITION OF APPLICATION</p> <p>REVIEWED BY: _____</p> <p><input type="checkbox"/> APPROVED / <input type="checkbox"/> DENIED    DATE: _____</p> <p>NOTES: _____</p> <p>_____</p> <p>_____</p>