



# East Nicolaus Joint Union High School District

2454 Nicolaus Avenue, Nicolaus, CA 95659 | Phone (530) 656-2255 | Fax (530) 656-1065

## 2021-2022 School Year District of Choice

One Transfer Application Form Must Be Submitted for EACH Student

In accordance with East Nicolaus Joint Union High School District policy, applications must be received at our East Nicolaus High School Administrative office **postmarked before December 31, 2020.**

Application for: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
First Name Last Name Date of Birth (Mo/Day/Yr)

Name of School this student is **currently** attending: \_\_\_\_\_

Transfer Request FROM: \_\_\_\_\_ District \_\_\_\_\_  
School District Name (where you reside)

District Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Please Note: The Governing Board of East Nicolaus Joint Union High School District is responsible for determining the number of transfers the district is willing to accept and for ensuring that students admitted are selected through a random, unbiased process. Placement in specific grade level is determined by space availability.

For the 2021-2022 school year, the student will be entering grade: \_\_\_\_\_

Does this student currently attend school in the East Nicolaus School District:  Yes  No

Does this student have any siblings currently attending school in the East Nicolaus High School District please list names:

Sibling Name: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Sibling Name: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

If you are submitting a 2021-2022 School of Choice application for more than one child, please list the name(s) of the other sibling(s), the grade he/she will be entering:

Sibling Name: Grade: School:

Sibling Name: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Note: Information on this application must be current. Applications will be signed by the District Representative (below), and a copy returned to you for verification. If the number of applications received exceeds space availability, a lottery will be held.

\_\_\_\_\_  
Parent/Guardian Name (Print) Parent/Guardian Signature

\_\_\_\_\_  
Home Address (Number & Street) City Zip Code

(\_\_\_\_\_) (\_\_\_\_\_) (\_\_\_\_\_) \_\_\_\_\_

Home Phone Number Work Phone Number Cell Phone Number

Your 2021-2022 District of Choice Transfer Request \_\_\_\_\_ is approved, providing the student meets the admission requirements of the school/district. You will be notified again prior to the start of the 2021-2022 school year.

**Note:** The district of residence may prohibit a transfer out if (1) the transfer would negatively impact either a court-ordered or voluntary desegregation plan or the racial and ethnic balance of the district; or (2) the district has set a limit on the number of students that may transfer out of the district pursuant to Education Code Section 48209.7. District of residence has no specific timeline by which it must act to deny a transfer.

\_\_\_\_\_  
Director of Student Services

\_\_\_\_\_  
Superintendent-Principal

Mark Beebe, Superintendent/Principal | Preet Cheema, Director of Student Guidance  
Neil Stinson, Director of Student Services

Website: [www.eastnicolaus.k12.ca.us](http://www.eastnicolaus.k12.ca.us) Questions? Email: [spartan.questions@eastnicolaus.k12.ca.us](mailto:spartan.questions@eastnicolaus.k12.ca.us)

