

Hanford Joint Union High School District
Employment-Related Transfer

Request for 20____/20____ School Year

Please type or print

New Request Renewal

Part A: Parent/Guardian completes this section and returns all copies to school district of residence.

Student's Last Name	Student's First Name	Date of Birth	Grade	Check One			School Requested
				Reg Ed	SDC	RSP	

School District of Residence: _____ County: _____

School District of Parent/Guardian Employment: _____ County: _____

School Requested: _____ (District retains the right to assign student to any school.)

Name of Parent/Guardian: _____ Home Phone: _____

Address: _____ Work Phone: _____

Employer Name: _____ Employer Phone: _____

Employer Address: _____ Supervisor's Name: _____

PLEASE ATTACH COMPLETED ANNUAL EMPLOYMENT VERIFICATION FORM AND CURRENT PAYCHECK STUB.

I declare, under penalty of perjury under the laws of California, that the information provided above is true and accurate. I understand that this information may be verified and that inaccurate or false information may subject my request to denial or revocation. I further understand that my employment is subject to periodic verification.

signature *date*

Part B: School district of residence completes and forwards all copies to school district of employment.

Action of **District of Residence**: _____ Date received: _____

Approved Employment verified on: _____ Active Military Yes No

Denied Verified by: _____

Reason for denial:

- Negative impact
- Transfer exceeds limits allowed by law

Signature and title of authorized representative: _____ Date: _____

Part C: School district of parent/guardian employment completes and distributes copies as indicated below.

Action of **District of Employment**: _____ Date received: _____

Approved

Denied

Reason for denial:

- Negative impact
- Educational cost would exceed state reimbursement
- Other: _____

Signature and title of authorized representative: _____ Date: _____

Original: District of employment

Copies to: District of residence & Parent/guardian

HANFORD JOINT UNION HIGH SCHOOL DISTRICT

823 W. Lacey Blvd. • Hanford, CA 93230

(559) 583-5901 • (559) 589-9769 • www.hjuhsd.k12.ca.us

Parent/Guardian

Request for 20____/20____ School Year

Annual Employment Verification

New Request Renewal

District of Residence: HJUHS

School of Residence: HHS HWHS SPS

Requested Employment District of Attendance: _____

Parent/Guardian (please circle one) (Please Print)

Name: _____ Address: _____

Hm Phone: _____ Wk Phone: _____ Cell Phone: _____

Student(s) Name:

Grade: _____

Grade: _____

Grade: _____

Verification of Employment:

*Required: Complete the following information and **attach a copy of current pay stub** showing employer name and address. If employer address on pay stub is a corporate address, then a letter from the employer stating local address of employer must accompany the pay stub.*

Name of Employer: _____ Phone: _____

Address: _____

Name of Supervisor: _____ Phone: _____

School District of Parent/Guardian Employment: _____

I verify that the above person is employed with noted employer listed above and is physically employed within the boundaries of the above stated school district for a minimum of 10 hours during the school week.

Signature of Supervisor: _____ Date: _____

Is parent/guardian active military? Yes No *If yes, and supervisor is not available, provide proof of active duty/location. If active duty parent/guardian is not available, the custodial parent/guardian must provide active duty identification or sufficient proof thereof.*

I will immediately notify the Superintendent of the Hanford Joint Union High School District upon any change in employment status. The noted employer is authorized to release employment information to the Superintendent of the Hanford Joint Union High School District as provided in this verification.

I understand this verification is valid for one year only and must be renewed annually by resubmitting this form to the Hanford Joint Union High School District. The Hanford Joint Union High School District will provide information to other districts regarding the location of their resident students. Transportation is not provided by the Hanford Joint Union High School District and is to be provided by the parent/guardian.

I declare under penalty of perjury that the foregoing is true and correct. It is understood that, if upon review, by both districts, any declaration contained herein is not verifiable to the satisfaction of the Superintendent of the Hanford Joint Union High School District and other district, all entitlements and benefits accrued by such declarations are void and the residence of the parent/guardian will be deemed the residence of the pupil for school purposes.

Signature Parent/Guardian: _____ Date: _____

For District of Residence Office Use only: Date verified: _____ By: _____
Approved: _____ Denied _____ Authorized Signature: _____