



Riverside County
Board of Education

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Dear Parent or Legal Guardian:

**ALL APPEALS AND SUPPORTING DOCUMENTS MUST BE
SUBMITTED VIA E-MAIL TO: RCBEAppeals@rcoe.us**

Attached is the required form for filing an interdistrict attendance appeal with the Riverside County Board of Education. Also included are the Riverside County Board of Education Rules of Procedure pertaining to Interdistrict Attendance appeals.

**PLEASE READ THIS INFORMATION CAREFULLY BEFORE YOU
COMPLETE THE REQUESTED FORM**

In accordance with California Education Code 46601, any appeal made to the County Board of Education must be made **within 30 days** of the district's denial.

In accordance with California Education Code Sections 46600 to 46609, the school districts of Riverside County establish Interdistrict agreements annually, which provide for the exchange of pupils.

The enrollment of pupils from districts, other than that of residence is not mandatory. If there is sufficient room in the district, school, and program of desired attendance, requests will be considered, provided the reasons are justifiable and in accordance with district governing board policy.

PLEASE NOTE:

The appeal process is designed to address the denial by a district based on the specific reasons presented by the student/parent in **the first transfer request and the appeal** that the **district considered** when the transfer was denied.

- Appeals presented for consideration by the Riverside County Office of Education are to reflect **only information that was provided to the district** when the request for a transfer was denied.
- The presentation of new information, not considered by the district, may result in a remand of your request back to the district with no action being taken by the County Board.

- Requests based upon convenience or personal preference may not be considered.
- Transportation is the responsibility of the parent/guardian.

LIMITED AUTHORITY OF THE COUNTY BOARD:

- Interdistrict attendance appeals granted by the County Board of Education are to a district, not a specific school. School placement is at the discretion of the receiving district, based on space available.
- Interdistrict attendance transfers granted by the County Board of Education are for one school year ONLY.

To file your appeal:

- (1) Complete the “Interdistrict Attendance Appeal and Request for Hearing”
- (2) Along with an original signature on the completed “Interdistrict Attendance Appeal and Request for Hearing” form, provide the following supporting documents. **VIA EMAIL TO: RCBEAppeals@rcoe.us**
 - a. Copies of all correspondence between you and the district that denied the transfer, including the denial notification
 - b. Any additional documents (doctor’s notes, employment verification, caregiver information, etc.) supporting the appeal (limit to 10 pages)

In order to be heard **appeal documents must be physically received by the Pupil and Administrative Services Unit within (30) calendar days following the failure or refusal of a district to issue a permit** (specifically, the 30-day time period begins from the date of the final letter of notice from the district, not the date of the receipt by the parent) and will be accepted only after verification that all local administrative remedies have been exhausted. There is no extension of the deadline.

If you have any further questions, please contact the Pupil and Administrative Services Unit at (951) 826-6248 or via e-mail at rcbeappeals@rcoe.us.



RIVERSIDE COUNTY BOARD OF EDUCATION

Interdistrict Attendance Appeal and Request for Hearing

TO: SECRETARY, RIVERSIDE COUNTY BOARD OF EDUCATION

In accordance with Education Code Section 46601 and Riverside County Board of Education Bylaw 9621, I (we) hereby request a hearing for the purpose of an interdistrict attendance appeal.

Pupil's Name: _____ Date of Birth: _____ Grade Requested: _____

Parent/Legal Guardian: _____

Home Address: _____

Home Phone: _____ Work Phone: _____

Email: _____

School District of Residence: _____ School: _____

School District of Desired Attendance: _____

School District that Denied Request: _____ Date of Denial: _____

(attach copy of denial)

State reason(s) for which you requested an interdistrict attendance transfer:

☐ I (we) hereby certify that this information is true and correct to the best of my (our) knowledge

☐ Translation Services requested (Language): _____

Parent/Legal Guardian Signature (or pupil, if 18 years or older)

Date*

* Please note that this completed form must be received by RCOE staff within 30 days from the date of the interdistrict transfer denial. Return via email to: RCBEAppeals@rcoe.us