**NORTH COUNTY JOINT UNION SCHOOL DISTRICT**
500 Spring Grove Road
Hollister, CA 95023
Phone: 831.637.5574
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# ALLEN BILL APPLICATION

REQUESTS BASED ON "ALLEN BILL" (CAL. EDUC. CODE § 48204(b)) – RESIDENCY BASED ON PARENT/GUARDIAN EMPLOYMENT

**FOR SCHOOL YEAR: 2026/2027** Requested Grade: _____ Date of Request: _____

| Student Name (Please Print Clearly) | Current Grade | Date of Birth (MM/DD/YY) | Male / Female (Please circle) |
|---|---|---|---|
| | | | |

Home Address Street City, State Zip Code

Current School of Attendance: _____ Current District of Residence: _____

Parent/Guardian Phone (Home / Work / Cell)

Parent/Guardian Phone (Home / Work / Cell)

_____
Parent/Guardian Email

**To determine if space is available in the appropriate class/program, the following information MUST be provided**.
Does the student have an Individualized Education Program (IEP)? ☐ Yes ☐ No
Does the student have a 504 Plan? ☐ Yes ☐ No

*Note: If the answer to either of the above questions is "Yes," please **attach a copy of the student's latest IEP or 504 Plan.**

**Verification – Parent/Guardian Employment**

Education Code 48204, subdivision (b), commonly known as the "Allen Bill," allows residency to be established for students based on parent/guardian employment within the district. **The North County Joint Union School District (District) is currently accepting requests from parents of out-of-District students seeking to attend school in the District under the Allen Bill, pursuant to applicable District policies and regulations.** When applying for admission to a District school based on employment, the parent/guardian shall provide evidence of physical employment within District boundaries **annually**. **Evidence shall also indicate the number of hours per school week employed at that location.** The Governing Board of the District may initially deny enrollment based on parent/guardian employment if any of the following circumstances exists:

1. The additional cost of educating the student would exceed the amount of additional state aid received as a result of the transfer. (Educ. Code 48204)
2. The school facilities are overcrowded at the relevant grade level.
3. Other non-arbitrary circumstances exist, including false or misleading information on application. (Educ. Code 48204)

**☐ I work 10 or more hours per week within the boundaries of NCJUSD**

Father's/Guardian's Employer Employer's address Employer's phone

Mother's/Guardian's Employer Employer's address Employer's phone

Employment verification attached: ____ Letter from Employer ____ Payroll Voucher/Statement ____ W2 or 1099

**Parent/Guardian Acknowledgement:** I / We declare, under penalty of perjury, that the information contained on this form is accurate and complete, and that I have read and understood the regulations and policies of North County Joint Union School District pertaining to parent-based employment, including:

√ The information provided herein may be shared with the District in which I reside.
√ Approved transfers are valid only as long as parent/guardian maintains physical employment within District boundaries.
√ Once an intial application is approved, the student need not reapply to continue attending school in the District.
√ It is the parent's/guardian's responsibility to furnish transportation for any student accepted under this application.

Parent(s)/Guardian(s) Signature(s): _____ Date: _____

********DISTRICT USE ONLY********

**Date Received:_____ Application is: ____Approved ____Denied**

**Date:_____District Office Administrator:_____**