School Year 2017-2018

Additional School Choices Form

Educational Placement Center
555 Franklin Street, Room 100
San Francisco, CA 94102
415.241.6085

SFUSD SAN FRANCISCO PUBLIC SCHOOLS

Student Information

Last Name _____ First _____ Middle _____

Applying for Grade _____ Date of Birth MM DD YYYY

School Choices

Enter your choices: Fill in the program, school name, and school number for the schools you would like the student to attend. You may apply to more than one program at a school by placing each program on a separate line. If you are not offered a placement to any of your choices, the District will place your student in a school with openings.

	Prog	School Name	Sch#
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			

	Prog	School Name	Sch#
45			
46			
47			
48			
49			
50			
51			
52			
53			
54			
55			
56			
57			
58			
59			
60			
61			
62			
63			
64			
65			
66			
67			
68			
69			
70			
71			
72			
73			
74			
75			
76			
77			
78			

	Prog	School Name	Sch#
79			
80			
81			
82			
83			
84			
85			
86			
87			
88			
89			
90			
91			
92			
93			
94			
95			
96			
97			
98			
99			
100			
101			
102			
103			
104			
105			
106			
107			
108			
109			
110			

Non-Discrimination Policy
San Francisco Unified School District programs, activities, and practices shall be free from discrimination based on actual or perceived race, color, ancestry, national origin, ethnic group identification, age, religion, marital or parental status, physical or mental disability, sex, sexual orientation, gender, gender identity, or gender expression; or on the basis of a person's association with a person or group with one or more of these actual or perceived characteristics.
If you believe you have been discriminated against, immediately contact the school site principal and/or Executive Director of the Office of Equity, Ruth Diep, at (415) 355-7334 or diepr@sfusd.edu. A copy of SFUSD's uniform complaint policy is available upon request.

Parent/Guardian Name (PRINT) _____

Parent/Guardian Signature _____ Date MM DD YYYY

Official use only

Submitted at/Taken by	Date	Proof of Address #1	Proof of Address #2	Proof of Birth	Appointment L/A	HO#	Entered by	Date