



Administrative Offices 1163 E. Seventh Street Chico, CA 95928-5999
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2015-2016 Program Improvement SES Parent Selection Form

(For parental use in selecting SES option when student is attending a *Program Improvement* school in year 2 or more)

Your child has the option to receive supplemental education services. The district will give priority to students based on educational need—the lowest-achieving eligible students will receive the services first—up to the amount of funds available through Title I for this purpose.

Transportation to and from providers is the responsibility of the parent.

Please fill out this form and return it to the school office. **Please fill out one form per child.**

Applications must be completed and returned directly to your school site or delivered to the District Office.

Student Information

“PLEASE PRINT IN BLACK OR BLUE INK.”

Name of student’s school: _____	(Student) Last Name	First Name	M.I.	I.D. Number
	Street Address	Apt.	City	Zip Code
Grade level for 2015-2016: _____	Parent/Guardian Name	Home Telephone	Work/Cell	

Yes, I would like my child to receive Supplemental Educational Services.