

Board of Trustees
John Norman, President
Willie Hamilton, Clerk
Ken Cope, Member
Deborah Rex, Member
John Schouten, Member



District Administrative Office
2045 South San Jacinto Avenue
San Jacinto, C A 92583-5626
Telephone: (951) 929-7700
Fax: (951) 658-3574
web site: www.sanjacinto.k12.ca.us

Dedicated To Educational Excellence

Shari Fox, Ed.D., District Superintendent
sfox@sanjacinto.k12.ca.us

SJUSD
Authorization for Adult to Act as Custodial Parent

I (we), _____ (and) _____ of _____
Name Name City

_____, _____, do hereby state that I (we) are
County State

The natural parent(s), legal guardian(s) having legal custody of _____ a
Child's Name

Minor, age _____, born _____, who resides with me (us) at _____

I (we) authorize _____, an adult, who resides at _____
Name Address

In the city of _____, county of _____, state of _____ to

Act on my (our) behalf in school matters such as, but not limited to, signing absence verifications, approving field trips, acknowledging notifications, and signing other authorizations.

Dated this _____, county of _____, 20_____.

Signature of Parent or Guardian Expiration

Child's doctor _____ Child's allergies, if any _____

Parent's doctor _____ Medicines child is taking _____

Choice of specialists _____

Natural parent(s), legal guardian(s) having legal custody of _____
Child's Name

***Note: It is strongly recommended that this form be signed and notarized prior to accepting.