## PINCKNEY COMMUNITY SCHOOLS INTERDISTRICT SCHOOLS OF CHOICE PROGRAM

#### **APPLICATION FORM FOR SCHOOL YEAR 2017/2018**

#### Schools of Choice Program

#### Interdistrict Schools of Choice Program:

- The Pinckney Community Schools is accepting applications for enrollment from students in grades K -12 who do not reside within the Pinckney Community Schools boundaries pursuant to Section 105 and 105c of the State Aid Act.
- There are an unlimited number of enrollment spaces available for 2017/18 in grades K-12. (excludes Alternative Education High School and is limited to 25 slots in the grade 9-12 Virtual School programs)
- There is no tuition charge for students accepted for enrollment under this program.
- The Pinckney Community Schools and the home district (if student resides within a
  contiguous intermediate school district) must have a written agreement to provide a free and
  appropriate public education, including responsibility for payment of added costs, for any
  student eligible for and/or receiving special education programs and services, prior to
  enrollment acceptance.
- Students do not need a release from their home district if accepted for enrollment in the Pinckney Community Schools under Schools of Choice.
- Transportation will be the responsibility of the parent/guardian. Parents may utilize an existing Pinckney Community Schools bus stop that is near their residence.
- Applications may be submitted beginning March 10, 2017 through August 31, 2017. Applications submitted after August 31<sup>st</sup> through the first week of school will be considered after those who have applied within the timelines have been placed, and subject to available space at the applicable school building.

(Note: Slots are generally available up through the first week of the 17/18 school year)

#### **DIRECTIONS:**

- 1. Parent/Legal Guardian needs to complete the attached form and sign on the appropriate line. [If the parent/legal guardian is requesting participation in the Interdistrict Schools of Choice Program for more than one student in the family, a separate Application Form should be completed for each student.]
- 2. Mail, fax (810-225-3909), email (soc@pinckneypirates.org) or drop off the completed form to the Pinckney Community Schools Board of Education Office, 2130 East M-36, Pinckney, Michigan 48169.
- 3. If you have any questions or would like assistance with the Interdistrict Schools of Choice Program, please contact Brian Higgins, Assistant Superintendent for Human Resources and Student Services, at (810) 225-3900.

# PINCKNEY COMMUNITY SCHOOLS INTERDISTRICT SCHOOLS OF CHOICE PROGRAM

### **APPLICATION FORM FOR SCHOOL YEAR 2017/2018**

PLEASE PRINT	<u> </u>			
Student Name			Male	Female
	First	Last		
AddressStre	 eet	P.O.Box	City	Zip
			•	·
Date of Birth		_ Grade in Attendance for	2017-18 School Yea	ar
If Requesting an E	Elementary School	l, please list 1 <sup>st</sup> and 2 <sup>nd</sup> ch	oice.	
1 <sup>st</sup> Choice	pice 2 <sup>nd</sup> Choice			
School Currently A	Attending			
Home School Dist	rict			
Has the student be	een suspended fro	om school in the last two	(2) years? Yes	No
If yes, please expl	ain			
If yes, and services  NOTE: Acceptance origin, sex, height,	needed are other the for enrollment shawing weight, marital state oney Community Sch	eive special education ser than speech, please attach all not be granted or refused us or athletic ability. However nools must develop a writter	the most recent IEP.  based upon religion,  ver, should special ed	race, color, nationa lucation services be
Parent or Legal Gu	ıardian (Please Pri	nt)		
Home Phone		Work Phor	ne	
Email Address				
under the Interdistri procedures outline Community Schools regards to academ	ict Schools of Choic d. In order to pro s to receive student ic, disciplinary, and	to have my son/daughter as se Program. I have read the ocess student's application record information from my I special education (if application) whith the privacy Act (FERPA)	program description, I give my permission student's current or peable) records. This	and understand the on to the Pinckney revious school(s), ir
Signature of Parent	t/Legal Guardian		Date	
Signature of Studer	nt (if 18 or over)		Date	