



# 105/105C Schools of Choice Application 2017-2018 School Year



**Applications will be accepted May 1 through Aug. 24, 2017.**

## **Schools of Choice Enrollment Guidelines**

The Kearsley Community School District is accepting applications for enrollment for the 2017-2018 school year for students who do not reside within the district's boundaries pursuant to section 105 and 105c of the State Aid Act. There are unlimited openings in all grade levels.

**Transportation is the responsibility of the parent / guardian.  
MHSAA rules apply.**

Students are not charged tuition and they do not need a release from their resident district if accepted for enrollment in Kearsley Community Schools under section 105 and / or 105c Schools of Choice program.

A Schools of Choice application will not be accepted without a copy of a **behavior report** from each of the 2015-2016 and 2016-2017 school years or a document from the school(s) attended in 2015-2016 and 2016-2017 indicating there is no behavior for the student.

Kearsley Community Schools may deny enrollment to a nonresident applicant if any of the following applies:

- The applicant is or has been, within the preceding two years, suspended from another school.
- The applicant has been expelled or withdrawn in lieu of expulsion from another district.
- The applicant has been convicted of a felony.

All Student Code of Conduct rules, procedures and policies will apply to all students who enter Kearsley Community Schools under the Schools of Choice guidelines and procedures.

**Applications may be obtained at Kearsley Community Schools Administration Building,  
4396 Underhill Drive, Flint, or online at [www.Kearsleyschools.org](http://www.Kearsleyschools.org).  
Applications will be accepted May 1 through Aug. 24, 2017.**

**This APPLICATION and the student's BEHAVIOR REPORT  
for the 2015-2016 and 2016-2017 school years must be returned to**

**Kearsley Community Schools  
Administration Building  
Attention Traci Corchado  
4396 Underhill Drive  
Flint, MI 48506  
Fax (810) 591-8421  
Phone (810) 591-7611  
[tcorchad@kearsleyschools.org](mailto:tcorchad@kearsleyschools.org)**

**Your application is not your enrollment form. If accepted,  
you will be contacted to start enrollment proceedings.**



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<b>Office use only</b> ____ New student ____ Current student
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Student's Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Apt./Lot # \_\_\_\_\_

City \_\_\_\_\_ ZIP code \_\_\_\_\_ Date of Birth \_\_\_\_\_

Male \_\_\_\_ Female \_\_\_\_ Grade for 2017/2018 \_\_\_\_ Student's age \_\_\_\_

Mother's / Guardian's resident district \_\_\_\_\_ Father's / Guardian's district \_\_\_\_\_

Does the student receive special education services? Yes \_\_\_\_ No \_\_\_\_ Does s/he qualify? Yes \_\_\_\_ No \_\_\_\_

Siblings applying? Yes \_\_\_\_ No \_\_\_\_ If yes, please list students' names and grades. **Each sibling must submit an application.**

Name \_\_\_\_\_ Grade \_\_\_\_\_ Name \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Grade \_\_\_\_\_ Name \_\_\_\_\_ Grade \_\_\_\_\_

Are there siblings already attending Kearsley Community Schools under the Schools of Choice program? Yes \_\_\_\_ No \_\_\_\_

If yes, please list each student and note building attending.

Name \_\_\_\_\_ Grade \_\_\_\_\_ Name \_\_\_\_\_ Grade \_\_\_\_\_

Name \_\_\_\_\_ Grade \_\_\_\_\_ Name \_\_\_\_\_ Grade \_\_\_\_\_

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### Enrollment information for past two years

<b>2016-2017 School Year</b>
What school <b>district and building</b> is student attending? <i>Example: Flint Schools, Potter Elementary</i>
_____
What grade is s/he in? _____
If high school, how many credits earned to date: _____

<b>2015-2016 School Year</b>
What school <b>district and building</b> did student attend? <i>Example: Flint Schools, Potter Elementary</i>
_____
What grade was s/he in? _____
If high school, how many credits earned to date: _____

**Please read and sign:** I am applying to have my student attend Kearsley Community Schools under the 105/105C Schools of Choice program. I have read the Schools of Choice Enrollment Guidelines and understand the procedures outlined, including parents are responsible for transportation to / from school and MHSAA rules for athletic eligibility will be enforced. In order to process my student's application, I will provide student record information from my student's current or previous school(s) regarding disciplinary records. I also give my permission to have the local law enforcement review my student's information for any felony convictions. This permission is given pursuant to the Family Educational Rights and Privacy Act.

Parent / Guardian \_\_\_\_\_  
Please print name Please sign name Date

Primary phone number \_\_\_\_\_ Secondary phone number \_\_\_\_\_

**Note:** Acceptance for enrollment shall not be granted or refused based upon religion, race, color, national origin, gender, height, weight, marital status or athletic ability. However, should special education services be required, the Kearsley Community School District must be able to obtain a written agreement for services, including added costs, with the resident district if outside of the Genesee County area in order to accept a student under the 105C Schools of Choice program.



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**OFFICIAL OFFICE USE**

Student's Name

\_\_\_\_\_ Last First Middle

\_\_\_\_\_ Behavior report received and verified

\_\_\_\_\_ Student has no discipline

\_\_\_\_\_ Suspensions / Expulsions / Felonies noted

\_\_\_\_\_ Signature of Kearsley Community School's SOC Coordinator

\_\_\_\_\_ Date

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 \_\_\_\_\_ Accepted

\_\_\_\_\_ Denied

\_\_\_\_\_ Signature of Kearsley Community School's Superintendent

\_\_\_\_\_ Date

Building placement \_\_\_\_\_

Grade \_\_\_\_\_

\_\_\_\_\_ Parent / Guardian letter mailed

<p><b>Notes:</b></p>			
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# Confirmation of Behavior Report For Schools of Choice Applicants



This form **MUST** be completed by **EACH** school / district that the student has attended during the entire 2015-2016 and 2016-2017 school years. (A print-out of all behavior for the student during this timeframe **MUST** be attached to this form.)

Please fax, e-mail or mail this form to  
Kearsley Community School's Administration Building  
4396 Underhill Drive, Flint, MI 48506  
Fax (810) 591-8421 Phone (810) 591-7611  
tcochard@kearsleyschools.org

**DIRECTIONS:** Please have the school or district where you child attended in 2015-2016 and /or 2016-2017 complete this form. All sections must be filled out. *The signature of a school official AND a parent /guardian is **REQUIRED on this form.*** Failure to complete any section of this form can be reason for denial of the Schools of Choice application. Requiring the information below is supported by state law.

**A willful false statement on this confirmation can result in a report to the appropriate authorities, and may result in the student being removed from school, even after the school year has started.**

Student's name \_\_\_\_\_ Birth Date \_\_\_\_\_

Former school / district (include city and state) \_\_\_\_\_

Time frame when child attended former school / district \_\_\_\_\_

School phone with area code \_\_\_\_\_

## BEHAVIOR REPORT FOR PAST TWO YEARS

Has student been suspended in the past two years? Explain (include dates)	Yes	No
Has student been expelled or withdrawn in lieu of expulsion? Explain	Yes	No
Has student been convicted of a felony? Explain	Yes	No

Printed name and title of school official \_\_\_\_\_

Signature of school official \_\_\_\_\_

Signature of parent / guardian \_\_\_\_\_