



Montcalm Area ISD Collaborative Schools of Choice



2024-2025 Application for Enrollment

General Information: Kindergarten through twelfth grade students residing in a local district may apply to attend any other local public school district. Use one application for each student.

Section 1: To be Completed by the Student's Parent or Guardian

| | | |
|--|--|---|
| STUDENT NAME: | | |
| Birth Date: | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | Grade: |
| Resident District of Student: | | District/Building Currently Attending: |
| District/Building Name of Requested Enrollment (Choice): | | Alternate Choice: |
| First Choice: | | |
| Special Education Services Required by Student: | | |
| Reason for Transfer Request (optional): | | |
| Parent/Guardian Name: | | Telephone Numbers: |
| | | () () |
| Address: | City: | Zip Code: |
| Is the student on or ever been on suspension or ever been expelled from school? (Circle One) Yes No | | |
| If Yes, Explain: | | |
| By signing below, I acknowledge and accept the policies/regulations of Montcalm Area Intermediate School District Schools of Choice Program. I certify that the information on this application form is accurate to the best of my knowledge. I acknowledge that inaccurate information may jeopardize the applicant's admission eligibility. | | |
| _____ | | _____ |
| Signature Parent/Guardian | | Date |
| Section 2: To be Completed by Choice District Superintendent/Designee | | |
| Date of Receipt of Application | District Name: | |
| Contact Person (District Open Enrollment Program) | Title: | Telephone Number: |
| | | () |

Following review of this application for enrollment, and with consideration given to the policies and rules applicable to the MAISD Collaborative Schools of Choice Program, and to the criteria of the district which has been developed for approval for enrollment under this program, this application is hereby (check one):

Approved

Disapproved

(Must check one box below)

Lack of space within school

Lack of space within program

Lack of space within district

Other: _____

Superintendent/Designee Signature

Date

The Board of Education of the Montcalm Area Intermediate School District complies with all federal and state laws and regulations prohibiting discrimination and with all requirements and regulations of the United States Department of Education and the Michigan State Department of Education. It is also the policy of the Montcalm Area Intermediate School District Board of Education that no person on the basis of sex, race, color, religion, national origin or ancestry, age, marital status, limited English, or handicap shall be discriminated against, excluded from participation in, denied the benefit of, or otherwise be subjected to discrimination in any program, employment practice, or activity for which it is responsible or for which it receives financial assistance from the United States Department of Education or the Michigan State Department of Education.