Hillsdale County K-12 Public Schools

Section 105 and 105c Schools of Choice

Enrolling District	s Name:						
Application Date:				rollment Date:			
Student Name:				Birthda	ate:		
Street Address:				_		Apt/Unit #	
City:			State:			Zip Code:	
Phone Numbers:	Main #: () -		Other #:	()	-		Ext:
Current Grade:		County	you live in:				
School District in	Which You Live:						
Is student receiving any Special Education Services or classroom placement?				Yes		No 🗌	
Has student been suspended from any school?				Yes		No 🗌	
Has student been expelled from any school?				Yes		No 🗌	
Has student been convicted of a felony?				Yes		No 🗌	
Parent / Legal Gua	rdian Name (with whom	student live	es):			Apt/Unit #	
City:			State:			Zip Code:	
Phone Numbers:	Main#: () -		Other #:	()	_	•	Ext:
Email Address:	()						
List Siblings by First & Last Names Curre			t Grade	Does Sibling attend School student is applying to?			
				Yes		No 🔲	
				Yes		No 🔲	
				Yes		No 🔲	
				•			
be true and accurate ar program. I understand statement on suspension	legal Parent/Guardian of the and agree to abide by the policie any untrue, incomplete, or inaons or expulsions, will result in give permission to the School D	s, requirement ccurate inform either denial of	s, and conditior ation or statem f application, no	ns of the Scl ents, includ on-admissio	hool D ling bu	istrict and Sch ut not limited i immediate sus	ools of Choice to the pension and
Parent/Guardian		Date					
School Official's Sign	ature			Date			