

SECTION 105 SECOND SEMESTER SCHOOL OF CHOICE APPLICATION 2024-2025 SCHOOL YEAR

This application should be completed by the parent/guardian of the student seeking admission to Fowlerville Community Schools for the second semester of the 2024-2025 school year. Eligibility includes students who reside in any Livingston County School District other than Fowlerville Schools. <u>Applications must include the child's most recent cumulative report card and attendance record.</u>

Fowlerville Community Schools will accept Livingston County students free of charge. Applications must be received by the beginning of Second Semester.

ONLY ONE STUDENT PER APPLICATION

Student's Name			
Student's Name PRINT FIRST NAME	PRINT LAST NAME		
Grade of Student in Fall 2024 Are you applying to attend the Fowlerville On-Line Lea			
Date of Birth/ Male Female _			
Parent(s)/Guardian(s)			
Street Address			
City and Zip Code			
Home Phone #	Do not write in this space. Approved:		
Mother's Work # and/or Cell #			
Father's Work # and/or Cell #			
School District of Residence			
District Last Attended			
Name of School Attended			
Do you already have a child attending Fowlerville School () YES () NO	ools?		
If yes, which school? Grade			

RETURN COMPLETED APPLICATION FORM TO:

Fowlerville Community Schools
Janice Avis, Executive Secretary to the Superintendent
7677 W. Sharpe Rd., Suite A
Fowlerville, MI 48836
Email: AvisJ@fowlervilleschools.org

Phone (517) 223-6016

ADDITIONAL INFORMATION

- 1. A copy of the student's most recent cumulative report card including attendance record must accompany application.
- 2. The Fowlerville School District is not responsible for providing transportation for Section 105 Schools of Choice students.

3.	The Fowlerville School District will comply with all requirements of 1996 Public Act 30, Section 105, (Schools of Choice).								
4.	Does your child require special services? () YES () NO								
	Please explain:								
5.	If your child has an IEPT, please include a copy of your most recent IEPT. (Special Education - Individualized Education Program Team Report)								
6.	Has this student ever had school discipline referrals? () YES () NO								
	If yes, how many referrals in the past two years? Number of Referrals								
	Reason for Referral(s)?								
7.	Has this student ever been expelled from a previous school? () YES () NO								
	Please explain:								
8.	a.) Has this student ever been suspended from a previous school? () YES () NO Please explain:								
	b.) Dates and total number of suspensions:								
9.	Reason for making application to Fowlerville Schools?								
10.	How did you hear about Fowlerville Community Schools?								

Signature above also grants Fowlerville Schools permission to seek student information/records from prior school district.

FALSE INFORMATION WILL RESULT IN DENIAL OF ENROLLMENT OR ATTENDANCE IN THE FOWLERVILLE COMMUNITY SCHOOL DISTRICT.

Date

Notice of Nondiscrimination

It is the policy of Fowlerville Community Schools that the District will not discriminate in its programs, services, or activities against any person based on race, color, national origin, gender, disability, or age. Inquiries or complaints related to discrimination should be directed to:

The Assistant Superintendent of Schools Fowlerville Community Schools, 7677 W. Sharpe Rd, Suite A Fowlerville, Michigan 48836 (517) 223-6027

Parent/Guardian Signature

TEMPORARY RESIDENCE STATEMENT

This form helps determine eligibility under the federal McKinney-Vento Act. Only 1 form per FAMILY needed.

Name (of Student	t(s):							
Name o	of Parent/	'Guardian/Ca	retak	er (write NA if u	nava	nilable):			
1.	The student(s) temporarily stay(s) in one of the following situations: Emergency shelter or transitional housing program Motel/hotel Shares housing (doubled up or "couch surfing") with family or friends due to loss of housing, economic hardship or similar reasons such as family conflict, unhealthy living conditions, unsafe situations, abuse or neglect, parental incarceration or death. Substandard housing, campground; public or private place not designed for or ordinarily used as regular sleeping accommodation for humans, including cars, parks, public spaces, abandoned								
	buildings, and bus or train stations; or abandoned in a hospital. Another situation that is not fixed, regular or adequate:								
2.	Une	son for this li mployment ked out		ituation is: Evicted Family conflict		Inadequate income Unsafe conditions		Natural disaster	
3.	Since th	is date:				, I have	e lived in this 1	emporary address:	
	STREET					CITY	STATE	ZIP CODE	
4.	Please ii	nitial each pa	ragraj	ph below and sig	n:				
that fals	sifying res	idency inform	ation 1		f sch	ect and of my own p nool enrollment is ag			
with fed release transpor	deral law a and excha rtation star g asked to	and state grant inge informati ff, school soci	data r on with al wor	eporting requirement the school staff (i.e. kers, counselors,	nents the etc.)	, I give permission to McKinney-Vento lia	o the Educationaison, pupil aconcies that are a	counting, school assisting the student(s)	
limited	to releasir	ng and exchan	ging ir	formation to prov	vide	ervices for the stude the student(s) with trest of the student(s)	ransportation (ove including but not including public	
				for the remainder der the McKinney		he school year and I	have received	a copy and an	
Signatu	ıre & Rela	tionship to stu	dent:				I	Date:	

Transportation Request Form 2024-2025 School of Choice

IS BUSING NEEDED?, If you answered YES to busing needed, please co	AM	_, PM,	BOTH			
If you answered YES to busing needed, please co	ontinue; if you a	nswered NO, you've co	mpleted this form.			
Student's Name						
School Attending		Grade_				
Home Address						
Home Phone	Work Pho	one				
Transportation of School of Choice students parent. You may take your student to the no						
district. If your bus stop is approved, please			by the rowlervine school			
Please call the Transportation Offic	ce for times	and nearest bus s	stop (517) 223-6122.			
			(***) === **			
The above privileges must not cause any cho	anges in the bus	route overload any l	hus or result in additional			
The above privileges must not cause any changes in the bus route, overload any bus, or result in additional costs to the District. If any of these conditions occur, transportation may be terminated. Parents will be						
given five days' notice prior to the cancellat	tion of ridership).				
Transportation Request Forms must be submitted annually.						
Parent's Signature		Date	e			
<u> </u>						