



**Lapeer Community Schools**  
**Schools of Choice for Non-Resident Student (105 or 105c)**  
**Form 5113.02**

**Application for Enrollment**

**Instructions:** Kindergarten through twelfth grade students residing in Lapeer County (105) or in another county (105c) may apply to attend Lapeer Community Schools. Complete one application for each student. Every question under Section I **MUST** be answered. The completed application should be submitted to Lapeer Community Schools during the enrollment windows listed below. **Parents are encouraged to submit requests during the earliest enrollment window in order to have the best opportunity for space and schedule availability.** Applications can only be accepted for the start of the school year until the end of the first week of school and the start of the second term until 2 weeks prior to the end of the term. Transportation is the responsibility of the parent. **Lapeer Community Schools reserves the right to deny requests on the basis of class size and/or previous discipline records.**

<b>School of Choice Application Window (Fall 2020-2021):</b> May 1, 2020 – September 4, 2020	<b>Second Term Window:</b> <b>Elementary</b> November 9 – November 20 <b>Middle School and High School</b> January 4 – January 15
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**Section 1: To be completed by the Student's Parent or Guardian**

Student Name (Last, First, M.I.)			Birth Date: Month/Day/Year		Sex <input type="checkbox"/> Female <input type="checkbox"/> Male
Student Address			Telephone Number Home:	Work:	Cell:
City	State	Zip			
School Currently Attending		Grade in 2020-2021	<b>Special Needs</b> <input type="checkbox"/> Yes (Specify) (Attach current IEP or Section 504 Plan if applicable) <input type="checkbox"/> No		
Resident District of Student			<b>Is student currently attending the district of choice as a tuition pupil?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
Requested Building of Choice			<b>Does this student have a brother or sister already attending the School of Choice?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
Parent/Guardian Name (Last, First, M.I.)			<b>Has this student ever been suspended or expelled?</b> <input type="checkbox"/> Yes: <b>If yes, give district date and reason for suspension/expulsion.</b> <input type="checkbox"/> No		
Parent/Guardian E-mail Address					
<b>Reason for Transfer Request (Required)</b>					
The above information is true and correct to the best of my knowledge and I agree to release my student's records to the receiving school. I understand that any false information provided by me may be considered grounds for disapproval of this application.					
_____				_____	
Signature of Parent/Guardian				Date	

**Send or deliver to: Lapeer Community Schools, 250 Second Street, Lapeer, MI 48446-1897**

**Section 2: To be completed by Lapeer Community Schools**

Date Application Received	Confirmed District of Residence
Upon review of this application, and with consideration to the policies and procedures of the Schools of Choice Section 105C for enrollment under this program, this application is: <input type="checkbox"/> Approved 105 <input type="checkbox"/> Approved 105C <input type="checkbox"/> Disapproved	
_____	_____
Signature of Superintendent or Designee	Date
On the basis of information provided in this application, the above student will be assigned to:  Building: _____  Starting Date: _____ Grade: _____	The Lapeer Community Schools is unable to approve your request for enrollment in the Schools of Choice program for the following reasons:  _____ _____ <input type="checkbox"/> See Attachment

**The Lapeer Community Schools do not discriminate in any of its educational programs, activities, or employment practices on the basis of race, color, national origin, sex, age, disability, religion, height, weight, or marital status.**