SCHOOLS OF CHOICE ENROLLMENT GUIDELINES HARTLAND CONSOLIDATED SCHOOLS

Applications for the 2017/2018 school year will be accepted February 1, 2017 – August 31, 2017

The Hartland Consolidated 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 the Kindergarten program, grades 1-12, and Alternative Education.

- Transportation will be the responsibility of the parent/guardian; however, Hartland will consider providing transportation from an existing Hartland bus stop.
- Students are <u>not</u> charged tuition and they do <u>not</u> need a release from their home district if accepted for enrollment in Hartland Consolidated Schools under the Schools of Choice program.
- Applications may be obtained in person, by mail, by fax or online at *hartlandschools.us*
- Notification of acceptance will occur within two weeks of receipt of the application.
- The completed application should be returned to:

Paula Waters
Hartland Consolidated Schools
9525 E. Highland Road
Howell, MI 48843
f) (810) 626-2101
e) paulawaters@hartlandschools.us

Questions regarding the Schools of Choice program should be directed to Scott VanEpps, Assistant Superintendent of Personnel and Student Services at 810-626-2111.

SCHOOLS OF CHOICE APPLICATION FOR HARTLAND CONSOLIDATED SCHOOLS 2017/2018 School Year

APPLICATIONS MUST BE RECEIVED NO LATER THAN AUGUST 31, 2017

STUDENT NAME				male _	female
	last	middle	first		
ADDRESS	eet				
stre	eet	city			zip
DATE OF BIRTH		GRADE F	OR 2017/2018		
PUBLIC SCHOOL OF F	RESIDENCE		_CURRENT SCHO)OL	
How did you hear aboutWord of MouthContact HCS directl	Web Site		ewspaper Ad	Billboard	
Has the student ever be	en expelled from	school? YES	NO If yes,	please expla	in:
Has the student been so explain:	uspended from sc	hool in the last two ye	ars? YES N	IO If ye	s, please
Does the student qualify special classes and sup		cial education services	s? YES NO_	If yes,	please list
Current sibling attending If yes, student name an					
Other siblings applying? If yes, how many and w	YES NO_ hat grades:				
Siblings you may wish t If yes, name and age:_					
NOTE: Acceptance for origin, sex, height, weight required, the Hartland including added costs, order to accept a student or the student or th	ght, marital status Consolidated Schowith the resident	or athletic ability. Hool District must be all district if outside of	owever, should spe ole to obtain a writte the Livingston Educ	cial education	n services be it for services
Please read and sign: under the Schools of C outlined. In order to p Schools to receive stu academic and disciplina Privacy Act.	hoice program. I rocess my studer dent record inforr	have read the progra it's application, I give mation from my stud	am guidelines and u my permission to ent's current or pre	understand the the Hartland evious schoo	ne procedures Consolidated l(s) regarding
Parent or Legal Guardia	an				
		Please pri	nt name		
Home phone:	work or cell phone:				
Email Address:		- 11			
Signature of	parent/legal guar	dian	-	Date	