

HOUGHTON LAKE COMMUNITY SCHOOLS

School of Choice Vacancies

Persons interested in having their children attend Houghton Lake Community Schools for the 2017-2018 school year should complete this application and return it to 6001 W. Houghton Lake Drive, Houghton Lake, MI 48629 or fax it to 989-422-6606.

To be considered, applications must be received by **4:00 p.m. on Friday, September 8, 2017**. The district currently has unlimited availability in all grade levels.

Transportation to the school district is not provided. Parents must make arrangements to get their children either directly to school or to the nearest Houghton Lake Community Schools bus stop.

If you have any questions, please contact Dana Reilly at (989) 366-2056.



School Year: _____

HOUGHTON LAKE COMMUNITY SCHOOLS
School of Choice Application

Please check one of the boxes below:

_____ Section 105 – student residing in a school district within the COOR ISD

OR

_____ Section 105(c) – Student residing in a school district outside the COOR ISD

Please consider this request to have my child attend the Houghton Lake Community Schools under the School of Choice option.

Name of Student _____ Date of Birth _____ Entering Grade _____

Address _____ Phone _____

City _____ State _____ Zip Code _____

School District in which you reside _____ Are any siblings currently enrolling in Houghton Lake Community Schools? Yes No If yes, _____
(Name) (Grade) (Name) (Grade)

Reason for Parent/Guardian requesting transfer to a different school district:

Has this student ever been suspended or expelled? Yes No (please circle one) If yes, reason and date of occurrence: _____

Does the student have an IEP? Yes No (please circle one) If yes, please explain: _____

Does the student have a 504 Plan? Yes No (please circle one) If yes, please explain: _____

Parent/Guardian Name(s) _____ Parent's Email Address _____

I understand that enrollment requests are subject to space availability as determined by the Superintendent and that transportation to the Houghton Lake Community Schools is not provided. Parent/Guardian must make arrangements to get their child either directly to school, or to the nearest Houghton Lake Community School bus stop.

Parent/Guardian Signature _____ Date _____

Administrator Comments _____

Administrator's Signature _____ Date _____

Approved or **Denied** (please circle one) If denied, please state reason: _____
Superintendent's Signature _____ Date _____

PARENT/GUARDIAN NOTIFIED: _____ EMPLOYEE INITIALS: _____
TYPE OF NOTIFICATION: Phone _____ Email _____ Postal Mail _____ DATE: _____