

**Instructions**

- If student already attends Choice School, this form does not apply.
- Complete separate form for each student, if you have more than one student attending the Choice School.
- Return form with your Gratiot-Isabella Schools of Choice application.

<b>1 Student Information</b>	Student Name			
	Date of Birth	Grade entering this fall		
<b>2 Home School</b>	Home School (School currently attending where records are located)			
	Street Address	City	State	Zip
<b>3 Choice School</b>	Choice School			
	Street Address	City	State	Zip
<b>4 Other Information</b>	As the student's records are necessary in program planning, we are requesting that you include any special help information (psychological, placement in remedial or accelerated programs, etc.)			
<b>5 Authorization &amp; Signature</b>	<p>In compliance with the Family Educational Rights and Privacy Act of 1974, I hereby permit the <b>Home School</b> to release the records or copy of records of <b>my child</b> to the <b>Choice School</b>. (Student name, Home and Choice School provided above).</p> <p>Parent(s)/Guardian(s) signature: _____</p> <p style="text-align: right;">Date: _____</p>			
<b>6 Return Information</b>	<p><b>Mail or return to:</b>            Gratiot-Isabella RESD            Attn: Valorie Palmer, Schools of Choice Program            1131 East Center Street, P.O. Box 310            Ithaca, MI 48847-0310</p>			