



Application for School Year 2017-18

Please note: There will be a second Schools of Choice window that will open at the end of 1st semester / 1st trimester.

Early Application Deadline - August 11, 2017

Notification of acceptance will be mailed on August 18, 2017 for applications received at GI-RESD by 4:00 p.m. on August 11, 2017.

Final Application Deadline - August 25, 2017 (Applications will not be accepted after 4:00 p.m. on August 25, 2017).

Notification of acceptance will be mailed on September 1, 2017 for applications received at GI-RESD by 4:00 p.m. on August 25, 2017.

Questions - Contact Joyce Stevenson, 989-875-5101, ext. 2337; email: jstevenson@giresd.net

1 Choice District and Building	District First Choice		Choice Building Name		
2 Student Information	Student Name		Date of Birth		Phone
	Street Address		City		State Zip
	District student attending now	Building student attending now	Grade entering this fall		
	Has the student been expelled/suspended? Yes No If yes, for what reason:				
3 Parent Information	Parent(s)/Guardian(s)		Home Phone		Work Phone
	Street Address		City		State Zip
4 Signature Parent(s)/Guardian(s)	<p>By signing below, I acknowledge and accept the following:</p> <ul style="list-style-type: none"> • I understand the rules, regulations, grading system & graduation requirements of Choice School District. • I agree to abide by the Choice School district's requirements. • I agree to attend the Choice School for one full school year. <p>X Parent(s)/Guardian(s) signature _____ X Date _____</p> <p>Student (if over 16) signature _____ X Date _____</p> <p>(Comments are optional)</p> <p>Please turn to reverse side of form to explain reason(s) for requesting participation in Schools of Choice.</p>				
5 Signatures Superintendents	Parent(s)/Guardian(s) need to obtain the signature of Superintendent/Representative from the Home School and Choice School. Their signatures indicate receipt of application, but not approval.				
	Choice School X _____ Superintendent/Representative Signature X Date _____		Home School (signature optional) X _____ Superintendent/Representative Signature X Date _____		
6 Return Information	Mail or return to: Gratiot-Isabella RESD Attn: Joyce Stevenson, Schools of Choice Program 1131 East Center Street, P.O. Box 310 Ithaca, MI 48847-0310		Return by: August 11, 2017 by 4:00 p.m. for early application deadline August 25, 2017 by 4:00 p.m. for final application deadline		

The Board of Education of Gratiot-Isabella Regional Education Service District complies with all federal and state laws and regulations prohibiting discrimination and with all requirements and regulations of the United States Department of Education and the Michigan State Department of Education.

It is also the policy of Gratiot-Isabella Regional Education Service District Board of Education that no person on the basis of sex, race, color, religion, national origin or ancestry, age, marital status, limited English, or handicap shall be discriminated against, excluded from participation in, denied the benefits of, or otherwise be subjected to discrimination in any program, employment practice, or activity for which it is responsible or for which it receives financial assistance from the United States Department of Education or the Michigan State Department of Education.



Comments are optional.
Please explain your reason(s) for
requesting participation in Gratiot-
Isabella Schools of Choice Program.