

Edwardsburg Public Schools
69410 Section Street – Edwardsburg, MI 49112
269-663-3055 – Phone
269-663-6485 – Fax
www.edwardsburgpublicschools.org

Section PA 105C State Aid Release Form
Non-Resident Students Requesting Enrollment into
Edwardsburg Public School District
2018-2019

(Please fill in form completely and print clearly, one form per student)

Student's Name: _____ Date of Birth: _____
Parent's Name: _____ Home Phone: _____
Address: _____ Work Phone: _____
City: _____ State: _____ Zip: _____
School district of residence: _____ Phone: _____
School currently attending: _____ Phone: _____
Reason for request: _____

GRADE STUDENT ENTERING 2018-2019: _____

SIBLING(S) APPLYING or CURRENTLY ATTENDING (please circle):

Name _____ Grade: _____ Name _____ Grade: _____
Name _____ Grade: _____ Name _____ Grade: _____

ATTENDANCE LAST TWO SEMESTERS (DAYS MISSED)

1st Semester _____ 2017/2018 2nd Semester _____ 2017/2018

DISCIPLINARY RECORD

Has student been **SUSPENDED** from school in the **LAST TWO YEARS?**

YES NO

If YES, number of days (total) suspended _____; number of incidents _____

Reasons for disciplinary action: _____

Has student ever been **EXPELLED** from school?

YES NO

If YES, how long? _____

State reasons: _____

Does student have a criminal record?

YES NO

If YES, state offense: _____

Name of county and court which has jurisdiction: _____

Sentence: _____

Is student currently under court jurisdiction?

YES, on probation. How long? _____

NO, not currently on probation.

SERVICES

Has this student received special education programs, services or accommodations? YES NO

If YES, please explain briefly: _____

IN THE EVENT OF ANY DISCIPLINE AND/OR ATTENDENCE ISSUES, EDWARDSBURG PUBLIC SCHOOLS RESERVES THE RIGHT NOT TO RENEW THIS AGREEMENT FOR THE SUBSEQUENT SCHOOL YEAR.

MY SIGNATURE INDICATES ALL INFORMATION PROVIDED IS TRUE AND ACCURATE. I AM AWARE IF INACCURATE OR FALSE INFORMATION IS SUBMITTED THAT IT MAY RESULT IN THE SCHOOLS OF CHOICE STATUS BEING DENIED.

Parent or Guardian signature _____ Date _____

Student signature, if legal age _____ Date _____

For Office Use Only

APPROVED DENIED

Building Administrator _____ Date _____

Superintendent, Edwardsburg Public Schools _____ Date _____

The Board of Education does not discriminate on the basis of race, color, religion, national origin, sex, disability, age, height, weight, marital status, or any other legally protected characteristics, in its programs and activities, including employment opportunities.

If any person believes that the Edwardsburg Public Schools District or any of the district's staff has inadequately applied the principles and/or regulations of Title II, Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendment Act of 1972, Section 504 of the Rehabilitation Act of 1973, The Age Act and The Americans with Disabilities Act, s/he may bring forward a complaint to the district's Civil Rights Coordinator, Edwardsburg Public Schools, 69410 Section St., Edwardsburg, Michigan 49112 (269-663-1048).