



Coloma Community Schools

Phone: 269-468-2424 Fax: 269-468-2440
302 W. St. Joseph Street Coloma, MI 49038
www.ccs.coloma.org

APPLICATION FOR "SCHOOLS OF CHOICE" – SECTION 105c FOR 2019-2020

STUDENT INFORMATION: Please Print

CHILD'S NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____ CITY _____ ZIP _____

PHONE NUMBER: HOME _____ WORK _____

GUARDIAN NAME(S): _____

RELATIONSHIP TO APPLICANT: _____

SCHOOL DISTRICT YOU RESIDE IN: _____ GRADE FOR 2019-20: _____

SCHOOLS ATTENDED: PRESENT (18-19): _____

PREVIOUS (17-18): _____

Grades 1 – 12: Has your child ever been expelled from school? Yes ___ No ___

Grades 1 – 12: Has your child been suspended from school in the last two (2) years? Yes ___ No ___

To avoid a break in service, please check below any services your child is currently receiving:

Special Education 504 Plan ESL Other _____

NOTE: Coloma Schools is required to obtain a 105c Special Education Agreement for any Schools of Choice student that resides outside Berrien county and is currently receiving special education services from their resident district. **IF** Coloma is unable to obtain this agreement from your child's resident school district, your child will be unable to attend Coloma Schools under the Schools of Choice program.

SIBLING INFORMATION: Please Print

Does applicant child live in the same household with any other child(ren) who attended Coloma Schools in 2017-18 or 2018-2019? Yes ___ No ___

If Yes, please give their name(s) and school building they attend below.

STUDENT NAME _____ GRADE _____

STUDENT NAME _____ GRADE _____

STUDENT NAME _____ GRADE _____

School Use Only

Student #: _____ UIC: _____ SED: _____ District #: _____

Please state the reason(s) why you would like your child to attend Coloma Community Schools:

Please read the following information, complete the Release of Information and sign.

- **If any** information provided on this form is found not to be accurate, acceptance of this application is voidable at the option of Coloma Community Schools.
- **Coloma Community Schools** considers the following when reviewing applications: previous attendance, academics, and whether an applicant has been suspended in the previous 2 years or ever been expelled.
- **If limited openings** – if more applicants apply than slots are available, a random selection will occur as prescribed by law.
- **Transportation** to and from school is the responsibility of the parent/guardian. Students late to school will be considered tardy and no early releases will be allowed for transportation reasons.
- ➔ **Please include** a copy of the applicants' most recent report card or transcript. If one is not included, this may delay the application process.

RELEASE OF INFORMATION: (Complete only if student previously attended school elsewhere)

I give permission to the _____ School District and the
(Current School District)

_____ School District to release any requested school
(Previous School District – If Different From Above)

information to **Coloma Community Schools** for _____.
(Name of Student)

(Parent/Guardian Signature)

(Date)

➔ **IF APPLICABLE: To help expedite the processing of this application, a copy of the students' latest report card or transcript should be included with the completed application.** ←

Questions? Please call Dena Garland at 269.468.2424 x10 or email at: dgarland@ccs.coloma.org

Return the completed application and requested documentation as soon as possible to:
Dena Garland
Coloma Community Schools
P.O. Box 550 Coloma, MI 49038

Please sign the release on back of page

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