

**Delton Kellogg Schools**  
**2022-2023 Application for School of Choice**  
**(June 9th 2022 -September 9th 2022)**

**Instructions:** One application for each student to be completed by the child's parent or legal guardian. The completed application must be returned to Delton Kellogg Schools, Office of the Superintendent, located at 327 North Grove Street, Delton, Michigan 49046. Questions regarding this form may be directed to Justine McCowan at Justine.McCowan@dkschools.org

Section 1 (Please Print)			
Student's Name (Last, First, Middle)	Date of Birth	<input type="radio"/> Female <input type="radio"/> Male	Grade in Fall 2022
Student's Address	City	Zip Code	
Student's Resident School District	Specific Name of Current/Most Recent School Attended		
Parent/Guardian Name (Last, First, Middle Initial)		Telephone Number	
Parent/Guardian Address	City	Zip Code	

Section 2 (Please Print)	
Special Education services required? <input type="radio"/> Yes <input type="radio"/> No	If yes, please explain:
Has the student ever been expelled from school? <input type="radio"/> Yes <input type="radio"/> No	If yes, please explain:
Has the student been suspended from school in the past two years? <input type="radio"/> Yes <input type="radio"/> No	If yes, please explain:

Section 3 (Please read carefully)		
<p>By signing below I agree to hold harmless each participating school district, their employees and their Board of Education members for any decision in the selection process, potential or actual participation as Section 105 School of Choice student relative to academic achievement, co-curricular participation, student discipline relation to behavior and all other aspects of participation as a member of a student body.</p> <p>It is further understood that transportation for non-resident students will be the responsibility of the parent/guardian. I also consent to have all student record information (including academic and behavioral records) released to Delton Kellogg Schools from the district previously attended.</p> <p>I further understand that incomplete, false or misleading information will render this application to be null and void, which may result in removal of the student from the School of Choice Program and Delton Kellogg Schools.</p>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-bottom: 1px solid black; text-align: center;">Signature of Parent/Guardian</td> <td style="width: 50%; border-bottom: 1px solid black; text-align: center;">Date</td> </tr> </table>	Signature of Parent/Guardian	Date
Signature of Parent/Guardian	Date	

## Affirmation of Prior Discipline Record

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All non-resident students requesting admittance to Delton Kellogg Schools must complete this form.

**Instructions:** Check the applicable statement below, provide all appropriate information and sign this document.

Section 1	
<input type="checkbox"/>	The undersigned affirms that the student has NOT been suspended or expelled from any public or private school in Michigan or any other state.
<input type="checkbox"/>	The undersigned affirms that the student has been suspended or expelled from any public or private school in Michigan or any other state.

Section 2
<p>If you check the second statement, please explain the circumstances in detail. Include the name of the school, dates of suspension or expulsion and a description of the incident giving rise to the suspension or expulsion.</p> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 10px;"/> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 10px;"/> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 10px;"/> <hr style="border: 0; border-top: 1px solid black; margin-bottom: 10px;"/>

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

For Office Use Only		
Date verification sent: _____	Staff Member requesting information: _____	
Date application received: _____	Approved: _____	Denied: _____
Applicant Notified on: _____		