

APPLY IN 3 EASY STEPS!

1 SUBMIT A COMPLETED APPLICATION WITH THE FOLLOWING ITEMS:

- a. Most Recent Report Card
- b. Proof of Macomb County Residency (3 items)
- c. Affirmation of Student Discipline/Discipline Records

Turn in the completed paper and required documentation to begin your path to being a part of the Shorian Nation!

2 RECEIVE NOTICE OF ADMITTANCE STATUS

After your complete application has been submitted, you will receive notice of your acceptance, a request for interview, conditional acceptance, or denial. Placement at elementary buildings takes a little longer, however, you'll know that you are a part of Lake Shore usually within a week of your application submission.

3 ENROLL!

Once admitted, you begin the process of enrolling at one of our buildings, scheduling classes, and discovering all the potential for maximizing your experience as a Lake Shore student. The journey has begun!



Lake Shore
Public Schools

28850 Harper Avenue • St. Clair Shores, MI 48081
586.285.8481 ▼ lakeshoreschools.org



**Lake Shore
Public Schools**

SCHOOLS OF CHOICE REQUEST

Residency Status

(Please attach 3 items showing proof of residency)

Non-Resident Within District

How did you hear about us?

TV Newspaper Friend/Family
 Billboard Internet/Social Media Other _____

Student First/Middle/Last Name: _____ Birth Date: ____/____/____

Student Grade for Upcoming School Year: _____ Please check if your child has: IEP 504

Parent/Guardian First/Last Name: _____ Student Ethnicity: _____

Phone: _____ Email Address: _____

Address: _____ City: _____ Zip : _____

Do any siblings attend Lake Shore? Yes No If yes, what school ? _____

District in which you live: _____ Last School Attended : _____

When submitting application, parent/guardian must provide student discipline report for the entire previous two school years. This must be obtained from the school(s) the student attended during these times.

Has your child been suspended (in or out of school) in the last 2 school years? Yes No

Has your child ever been expelled? Yes No

SCHOOLS OF CHOICE POLICY

RESIDENT STUDENTS: Students shall attend the elementary school in the attendance area in which they reside. Exceptions will be made in accordance with the provisions of board policy.

NON-RESIDENT STUDENTS: The District shall accept applications for enrollment by non-resident applicants residing within the Macomb Intermediate School District. The District shall refuse to enroll a non-resident applicant if the applicant is or has been, within the preceding two years, suspended from another school or if the applicant has ever been expelled from another school.

By signing below, I accept the policies and regulations of Michigan and Lake Shore Public Schools regarding Schools of Choice. I understand that if at anytime it has been discovered that the information provided on this form is inaccurate and/or falsified, my child will be ineligible to attend Lake Shore Public Schools and will be excluded from attendance immediately. I live in Macomb County and am responsible for my child's transportation.

CONDITIONS: All students attending school outside of their attendance areas do so under the following conditions: A non-resident applicant residing within the Macomb Intermediate School District shall not be granted or refused enrollment based on intellectual, academic, artistic, or other ability, talent or accomplishment, or lack thereof, or based on a mental or physical disability, unless a similar resident student would also be excluded. A non-resident applicant residing within the Macomb Intermediate School District shall not be granted or refused enrollment based upon religion, race, color, national origin, sex, height, weight, marital status or athletic ability, or generally, in violation of any state or federal law prohibiting discrimination. Class size may not exceed district guidelines in order to accommodate choice students. The parent must guarantee positive student attendance and behavior in accordance with district policy. Students causing concern in any of the above areas may be transferred back to their assigned schools based on behaviors outlined in the Student Code of Conduct.

Parent/Guardian Signature: _____ Date: _____

PLEASE RETURN THIS COMPLETED FORM TO

Lake Shore Public Schools Administration Building
Attn: Veronica Robinson, Schools of Choice Coordinator
28850 Harper, St. Clair Shores, MI 48081
Email vrobinson@lsp.s.org or fax to 586-285-8463
Please call us with any questions you have or to confirm receipt of this form: 586-285-8610

ADMINISTRATIVE USE ONLY

Date Submitted :
 Granted Denied

NOTES :

Signature: _____ Date: _____ School Assignment: _____



AUTHORIZATION FOR REQUEST / RELEASE OF STUDENT RECORDS

This authorizes a one-time only release to the above organizations and/or individuals

- To Release:**
- ▶ All records — UIC number (Michigan Schools only) (including 504 Plan, discipline, psychological and special education testing information — IEP & MET)
 - ▶ Transcript of student's record, including key to grading system, grades at time of release, standardized test data, health records

Student Name: _____
FIRST MIDDLE LAST

Date of Birth: _____ Grade: _____

Has student ever been suspended? Yes No Has student ever been expelled? Yes No

Explain: _____

Does the student have a 504 plan? Yes No

Does the student have an IEP (Individualized Education Plan)? Yes No

I authorize: _____
FORMER SCHOOL DISTRICT

NAME OF SCHOOL ATTENDED

ADDRESS

CITY/STATE

ZIP

PHONE NUMBER

FAX NUMBER

PLEASE SEND SPECIAL EDUCATION RECORDS including 504 Plan, psychological and testing information — IEP & 504 TO:

Lake Shore Public Schools — Special Education Dept.

22850 Harper Avenue, St. Clair Shores, MI 48081

Phone: 586-285-8610 Fax: 586-285-8463

PLEASE SEND CA-60 RECORDS TO: (please check appropriate school)

- Lake Shore High School, 22980 13 Mile, St. Clair Shores, MI 48082 / 586-285-8900; Fax 586-285-8904
- Kennedy Middle School, 23101 Masonic, St. Clair Shores, MI 48081 / 586-285-8800; Fax 586-285.8804
- Masonic Heights Elementary, 22100 Masonic, St. Clair Shores, MI 48082 / 586-285-8500; Fax 586-285-8504
- Rodgers Elementary, 21601 L'Anse, St. Clair Shores, MI 48081 / 586-285-8600; Fax 586-285-8604
- Violet Elementary, 22020 Violet, St. Clair Shores, MI 48082 / 586-285-8700; Fax 586-285-8704

Signed: _____ Date: _____
PARENT/LEGAL GUARDIAN

SENDING SCHOOL ONLY

Name of Sending (former) School: _____

- According to our records, we can verify that the information provided above by the parent is correct.
- According to our records, the information provided above by the parent is not correct.

DATE

SIGNATURE OF SENDING SCHOOL DISTRICT ADMINISTRATOR & TITLE

TELEPHONE NUMBER



AFFIRMATION OF STUDENT DISCIPLINE

Student Name : _____
FIRST MIDDLE LAST

Date of Birth: _____ Grade: _____

Has student ever been suspended? Yes No Has student ever been expelled? Yes No

Explain: _____

Does the student have a 504 plan? Yes No

Does the student have an IEP (Individualized Education Plan)? Yes No

The undersigned affirms that the student above **has or has not been** in-house or out-of-school **SUSPENDED or EXPELLED** during the entire previous two school years from any public or private school in Michigan or any other state. The offense could include any Student Code of Conduct violation, any serious offense involving weapons, alcohol or drugs, the infliction of injury to another person, or for any act of violence against persons/property on school premises, at any school-sponsored activity, or on a public or private conveyance providing transportation to or from a school or school-sponsored activity.

**Please attach behavior print-out for student for timeframe noted above (even if the discipline/behavior is blank).

Additional Comments: *(if school/district is unable to print out student discipline/behavior, school official should make a note here and sign/date)*

Signed: _____ Date: _____
PARENT/LEGAL GUARDIAN

SENDING SCHOOL ONLY

Name of Sending (former) School: _____

- According to our records, we can verify that the information provided above by the parent is correct.
- According to our records, the information provided above by the parent is not correct.

Printed Name of School Official: _____

Printed Title of School Official: _____

Signature of School Official: _____

Telephone Number: _____