

MORRICE AREA SCHOOLS

7/09

691 Purdy Lane
Morrice, MI 48857
(517) 625-3142

MORRICE AREA SCHOOLS
SCHOOLS OF CHOICE APPLICATION

Name of Student _____
Last First Middle

Grade Requesting _____ Date of Birth _____

Address _____
Street City Zip

Parents' Name _____

Daytime Phone _____ Home Phone _____

Current District of Residence _____

Reason(s) for requesting admittance to Morrice Area Schools _____

Within the last two years, has your son/daughter received a school suspension? _____

Has your son/daughter ever been expelled from a school? _____

Does your son/daughter require special education services? _____
(for placement purposes only)

Signature of Parent: _____

FOR OFFICE USE

Application: Accepted _____ Denied _____ Date: _____

Signature of Superintendent: _____

Morrice Area Schools transports students to and from licensed day care providers (within the district) to the Morrice Elementary on the morning and after school runs.

Morrice Area Schools
Schools of Choice Application

If you answered “yes” to the questions about suspension and/or expulsion on page 1, please explain the circumstances of those events.

In my child’s last school, he/she was eligible for placement in grade _____.

Read Carefully!

I certify that the information on this application form is accurate to the best of my knowledge. I acknowledge that inaccurate information may jeopardize the applicant’s admission eligibility.

Signed: _____ Date: _____