



**Application for Schools of Choice Program**

5113 F1

Sault Ste. Marie Area Public Schools

First Semester 2022-23

**School:** \_\_\_\_\_ **Grade Entering:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Social Security #: (Optional)** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**School Last Attended & Dates:** \_\_\_\_\_ **School District in which you live:** \_\_\_\_\_

**Parent(s) Guardian(s):** \_\_\_\_\_

**Address (If different than Student's):** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

Has the student been suspended/expelled from any school during the past two years? Yes  No

Are any other family members applying for Schools of Choice to our district? Yes  No

By signing below, I acknowledge what I have indicated is correct and accept the policies and regulations of the Sault Ste. Marie Area Public Schools.

*Parents(s)/Guardian(s)/signature:* \_\_\_\_\_ **Date** \_\_\_\_\_

*Student (if over 16) signature:* \_\_\_\_\_ **Date** \_\_\_\_\_

Applications must be returned to: **Superintendent of Schools, 876 Marquette Avenue, Sault Ste. Marie, Michigan 49783.**

Applications received after August 26, 2022, will be processed on a first come first serve basis and will be limited to the remaining available seats. In accordance with state law, no applications will be accepted after September 9, 2022.

*Transportation of non-resident students is the responsibility of the parent/guardian. Students may use existing bus route/stops if space permits.*

The Board of Education of this School District Complies with all federal and state laws and regulations prohibiting discrimination and with all requirements and regulations of the United States Department of Education and the Michigan State Department of Education.

It is also the policy of this School Districts Board of Education that no person on the basis of sex, race color, religion, national origin or ancestry, age marital status, limited English, or handicap shall be discriminate against, excluded from participation in, denied the benefits of, or otherwise be subjected to discrimination in any program, employment practice, or activity for which it is responsible or for which it receives financial assistance from the United States Department of Education or the Michigan State Department of Education

**For District Use Only:**

Application Received by \_\_\_\_\_  
Date Approved \_\_\_\_\_  
Building \_\_\_\_\_

Signature \_\_\_\_\_  
Copy to:

Building  
 Resident District