

The Harper Creek Board of Education and Administration has determined that it will open the **unlimited Kindergarten Schools of Choice program to students residing in the Calhoun Intermediate School District for the 2020-21 school year. The application window will start on Thursday, May 14, 2020 and end on Friday, July 31st. Applications should be mailed or emailed to:**

**Harper Creek Administration Office
Attention: Gail Braman
7454 B Drive North
Battle Creek, MI 49014**

Or

**Email: bramang@harpercreek.net
(You will be sent a confirmation from HC once we receive your application by email. Please save this information for your records)**

This unlimited school of choice program is not a first come first serve process.

**If you have any questions please call 441-6571
(See fillable PDF application below)**

Harper Creek Community Schools
7454 B Drive North, Battle Creek, MI 49014
OUT OF DISTRICT SCHOOLS OF CHOICE -UNLIMITED
KINDERGARTEN STUDENTS ONLY
2020-21 School Year

Student's Last Name: _____ First Name: _____

Student's Middle Name: _____ Date of Birth: _____ **2020-21 Grade:** _____

Parent's Name _____

Address: _____

(Must provide proof of residency for this address. Gas, electric, water or property tax bill only)

City: _____ Zip Code: _____ Home Phone: _____

Cell phone mother: _____ Cell phone father: _____

If you are applying for a Harper Creek elementary building please list in order of preference:

_____ 2. _____ 3. _____

Required information

*Name of current attending school district: _____

Name of resident district if different than attending school district: _____

*List any **other** schools attended in the last two years. Please list city and state.

The above named student (check one) ___ has ___ has not ___ been suspended or expelled from any public or private school in Michigan (this includes in-house suspensions)?

If you have been suspended or expelled (includes in-house suspensions), explain the circumstances in detail. Include the school name, dates (year) of suspension or expulsion, and a description of the incident.

*Parent's Signature: _____ *Date: _____

(I verify that the above provided information is true and accurate. By signing this application I am giving my approval for Harper Creek Community Schools to request my child's discipline information from previous schools. I understand that my school of choice application can be denied for my child, at any time if Harper Creek Community Schools finds the information on this application to be false.) (Application must be received within the application window May 14, 2020 – July 31, 2020 to be valid)

Notification will be sent to inform you if your child has been officially accepted/denied or placed on a waiting list.

Office use only: Date application received: _____ App Accepted _____ App Denied _____

Harper Creek Authorization Signature: _____

Notes: