

**DELTON KELLOGG SCHOOLS  
SCHOOLS OF CHOICE APPLICATION**

**School Year 2014-2015  
(June 16, 2014 through Sept. 01, 2014)**

**Applicant Information**

Applicant's (Student) Name: \_\_\_\_\_

Grade you're applying for: \_\_\_\_\_

Last grade completed: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Address: \_\_\_\_\_

Telephone #: (\_\_\_\_) \_\_\_\_\_

Previous School District  
(Last two Years) \_\_\_\_\_

Resident School District (if different than above) \_\_\_\_\_

Has this applicant/student been suspended or expelled from school within the past two years? \_\_\_\_ YES \_\_\_\_ NO

If Yes, reason for suspension or expulsion: \_\_\_\_\_

Has this applicant/student been convicted of a felony? \_\_\_\_ YES \_\_\_\_ NO

Does the applicant have a relative currently living in the Delton Kellogg School District? \_\_\_ YES \_\_\_ NO

If Yes, Name and Address \_\_\_\_\_  
\_\_\_\_\_

Additionally, you will need to present the following information with this application:

- 1. Copy of the Student's Birth Certificate
- 2. Up-to-date Immunization records
- 3. Address of last school attended: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Special Note: The provisions of Section 105 have no effect on the Michigan High School Athletic Association (MHSAA) rules. Section 105 schools of choice pupils are considered nonresident pupils and, at MHSAA member high schools, are ineligible for interscholastic athletics for one full semester. REF: Section 105 schools of choice, 1996.

***Note: Transportation will be the responsibility of the student's family.***

The signature below gives permission for records pertaining to the "applicant" to be released to Delton Kellogg Schools.

\_\_\_\_\_  
Parent(s) Signature Date

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***For Office Use Only***

Date Application Received: \_\_\_\_\_

Application Approved: \_\_\_\_\_

Application Denied: \_\_\_\_\_ Reason: \_\_\_\_\_

Applicant/Parent Notified on: \_\_\_\_\_  
\_\_\_\_\_

# Affirmation of Prior Discipline Record

All non-resident students requesting admittance to Delton Kellogg Schools must complete this form. A willful false statement on this affirmation will result in a report to the appropriate authorities.

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

\_\_\_\_\_ The undersigned affirms that \_\_\_\_\_ has NOT been suspended or expelled from any public or private school in Michigan or any other state.

\_\_\_\_\_ The undersigned affirms that \_\_\_\_\_ has been suspended or expelled from a public or private school in Michigan or any other state

If you checked Statement 2, explain the circumstances in detail. Include the school name, dates of suspension or expulsion, and a description of the incident giving rise to the suspension or expulsion.

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\_\_\_\_\_ The undersigned affirms that \_\_\_\_\_ has not been convicted of a felony in this or any other State.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

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

OVER →

