



Superintendent, Dr. Arthur Ebert  
Assistant Superintendent, Mrs. Nicole Gittinger

## School of Choice 2022-2023

Sturgis Public Schools is offering unlimited School of Choice programming for 2022-2023.

**Question:** I am looking at the School of Choice program. What do I do now?

**Answer:** The best thing to do is to call Toni Andrews at 269-659-1502. She is located in the District Office at Sturgis Central Commons. You can get all of your questions answered and pick up an application packet or request mail delivery.

**Question:** What is the overall process for enrolling in the School of Choice program?

**Answer:**

1. Submit your child's completed application at Sturgis Central Commons ASAP.
2. Receive notification of acceptance or non-acceptance from Sturgis Public Schools after the district has reviewed your child's application.
3. Complete the necessary enrollment forms at the school listed on your acceptance letter.

**Question:** What if I live in Branch, Calhoun, Cass, Kalamazoo, or Van Buren Counties?

**Answer:** There is a program agreement between counties, however there are two windows for acceptance per year for out-of-county application, and the same restrictions apply. Call the number above for more information.

Return completed form to your Choice School Superintendent's Office ASAP.	<b>St. Joseph County          Schools of Choice Application</b>	If you have questions, please contact you Choice School Superintendent's Office
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<b>District Choice:</b> (Where the student would like to go to school)
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Student Name	Birthdate:
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Address, City, State, Zip
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School District in which you live:	Grade:
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Where did the student last attend school?
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Has the student been suspended from another school <u>within the last 2 school years</u> ? <input type="checkbox"/> Yes <input type="checkbox"/> No Has the student <u>ever</u> been expelled from another school? <input type="checkbox"/> Yes <input type="checkbox"/> No Has the student <u>ever</u> been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Parent of Guardian Name:
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Parent/Guardian Address, City, State, Zip
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Home Phone:	Cell Phone:
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Name and grade of student's siblings who are already attending <u>Choice</u> School District:
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By signing below, I acknowledge that I understand the rules, regulations, grading system, and graduation requirements of my Choice School District; I agree to abide by the School of Choice District's requirements; and I agree to provide proof of birthdate and immunization records to the School of Choice at the time of registration. Any misleading or incorrect information provided on this form will void this application.
Parent/Guardian Signature: <b>X</b> _____ Date: _____
Student (if over 18) Signature: _____ Date: _____
<i>No person on the basis of race, color, height, weight, marital status, national origin, gender, age, disability, religion, genetic information, or any other legally protected status will be discriminated against, excluded from participation in, or otherwise subjected to discrimination in any school district in St. Joseph County.</i>

<b>RECORD RELEASE FORM</b> In compliance with the Family Educational Rights and Privacy Act (FERPA), I hereby permit _____ <span style="display: block; text-align: center; font-size: small;">(current school)</span> to release the records or copy of records of _____ to _____. <span style="display: block; text-align: center; font-size: small;">(student) (choice school)</span> Parent/Guardian Signature: <b>X</b> _____ Date: _____
<i>As the student's records are necessary in program planning, we are requesting that you include any special help information (psychological, placement in remedial or accelerated programs, etc). We thank you in advance for your prompt reply.</i>

<b>FOR CHOICE SCHOOL USE ONLY</b> <input type="checkbox"/> Applicant Accepted for Enrollment - Contacted family (attached copy of "Notification of Acceptance" Letter). <input type="checkbox"/> Applicant Not Accepted for Enrollment - Contacted family (attached copy of "Notification of Non-Acceptance" Letter). Choice School's Representative Signature: _____ Date: _____
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