

# Non-Resident Enrollment Application

Student Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Parent/Guardian \_\_\_\_\_  
 Primary Phone \_\_\_\_\_  
 E-Mail/Secondary Phone \_\_\_\_\_  
 School District You Live In \_\_\_\_\_

**Submit Application to:**  
**Lorri Gierman**  
**Jenison Public Schools**  
**8375 20<sup>th</sup> Ave.**  
**Jenison, MI 49428**  
**Phone: 616-457-8890**  
**Fax: 616-457-8898**  
**Lgierman@JPSONline.org**



District & Building Student Currently Attends \_\_\_\_\_ Current Grade \_\_\_\_\_  
 Student's Birthdate \_\_\_\_\_ Grade Requested \_\_\_\_\_ Desired Date for Enrollment \_\_\_\_\_  
 Building Requested \_\_\_\_\_ Special Education Needs? \_\_\_\_\_  
 Does student have brothers/sisters enrolled in this district? If yes, list name, school, grade \_\_\_\_\_

Reason for Changing School Districts \_\_\_\_\_

Please indicate if this student has been:

\_\_\_\_\_ Suspended Date/Reason/District \_\_\_\_\_  
 \_\_\_\_\_ Expelled Date/Reason/District \_\_\_\_\_  
 \_\_\_\_\_ Truant Date/Reason/District \_\_\_\_\_

**Please review information on the back, then read and sign below:**

This district does not discriminate on the basis of race, color, disability, religion, gender or national origin. The district reserves the right to limit enrollment based on capacity of buildings or programs as well as failure of applicant to meet any special requirements for entry into its buildings or programs. Enrollment may also be denied to a student who has been suspended or expelled from their previous district or convicted of a felony and to a Special Education student wishing to enroll under Section 105c for whom a written cooperative agreement regarding costs cannot be obtained with their district of residence. I understand these limitations and certify that the information provided on this application is true and complete to the best of my knowledge.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**For District Use Only**

<p><b>Student Enrollment Status</b></p> <p>_____ Enrollment Approved                  _____ Building                  _____ Grade                  (Note: If Sec 105c Sp Ed Student, an agreement has been executed with the resident district.)</p> <p>_____ Enrollment Denied for the Following Reason:                  _____</p> <p>_____ Authorized Signature</p> <p>Date Received _____</p> <p>Date Notified _____</p>
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<p><b>Non-Resident Category under which Student is Enrolled &amp; MSDS Code</b></p> <p><i>Bolded categories must have signed release</i></p> <p>_____ <b>OAISD Choice Program * (06)</b>                  _____ Section 105 Schools of Choice (02)                  _____ Section 105c Schools of Choice (03)                  _____ <b>Resident District Release * (06)</b>                  _____ Special Education Ctr Program (06)                  _____ Alt Ed Prgm (Cooperative) (06)                  _____ Alt Ed Prgm (Non-Cooperative) (06)                  _____ CTE/Vocational Program (06)                  _____ Non-Public School Student (04)                  _____ Home Schooled Student (07)                  _____ Non K-12 District (01)                  _____ Inter-District Split Student (06)                  _____ Child of District Employee (06)                  _____ Other Section 6 Categories (06)</p>
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<p><b>* Resident District Release</b></p> <p>_____ Resident District Release                  _____ OAISD Choice Program</p> <p>This student is released for enrollment into another school district.</p> <p>_____ Releasing School District</p> <p>_____ Authorized Signature</p> <p>_____ Date</p>
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