

ELEMENTARY

**2019-2020 INTERNAL SCHOOLS OF CHOICE APPLICATION FORM
WEST OTTAWA PUBLIC SCHOOLS
Applications are due March 1, 2019.**

Student's Name: (First) _____ (Middle) _____
(Last) _____

Student's Birth Date: _____ My child will be going into the _____ grade.

Parents' Names: _____

Address: _____

City: _____ Zip Code: _____

Phone Numbers: Home _____ Work _____ Cell _____

Attendance Area: (where you live) _____

In order for your application to be considered, please rank order (1, 2, 3) your top three choices.

- | | | |
|-----------------|-------------------|--------------|
| ___ Great Lakes | ___ North Holland | ___ Waukazoo |
| ___ Lakeshore | ___ Pine Creek | ___ Woodside |
| ___ Lakewood | ___ Sheldon Woods | |

I am requesting this change in schools for the following reason (if for childcare, give caregiver's name, address, and phone number):

Any special needs/programs needed? _____

- Internal Schools of Choice requests will be honored based on space and availability in the school requested.
- Once approved, the Internal Schools of Choice student will be grandfathered into the requested school. The Schools of Choice student's place in their assigned attendance area is now vacant and will be filled by other requests. If the Schools of Choice student requests to return to their assigned attendance area, placement will be based upon space and availability.
- Transportation for Schools of Choice children is the parents' responsibility.

Parent Signature: _____ Date: _____

**Applications must be postmarked by March 1, 2019
and returned to the following address:
West Ottawa Public Schools
Office of Student Services
1138 136th Ave., Holland, MI 49424
or email to valkema@westottawa.net**

Written notification of student placement will be given to parent/guardian by June 20, 2019. Any applications received after March 1 will go on a waiting list.

OFFICE USE ONLY: Date received: _____ Approved or Denied Initials: _____