## Oak Park School District

## Office of Student Services

13900 Granzon St. | Oak Park, MI 48237 | Office: (248) 336-7708 | Fax: (248) 336-7731

## **APPLICATION for SECTION 105 & 105c SCHOOL of CHOICE**

## **ONLY ONE STUDENT PER APPLICATION**

Please Note: A detailed <u>discipline/behavioral report</u> and/or <u>letter</u> must be submitted with this application.

	How did y	ou hear about us?		
Newspaper/Flyer □ Radio	o/TV □ F	riend/Relative □	Other	
Date of Application:	3.50	Application	n to Attend Grade	<b>9</b> :
STUDENT INFORMATION				
Name of Student:			-	
Date of Birth:	1 1		Male $\square$	Female $\square$
School District of Residence:				
Last District Attended:				
Last School Building Attended:_				
Last Grade Completed:				
Previous School's Telephone #:				
	014	Dal		
PARENT/GUARDIAN INFORMATION				
Name:	10	Relationship to	Child:	
Address:				
Street		City   State   Zip		
Phone Number:		Work	Ce	ell .
Email Address:				
I understand that I am not entitled to transportation services because I have chosen a school outside of my resident district (i.e. School of Choice, McKinney Vento, Special Education, etc.).				
Parent/Guardian Signature			Date	