



# SCHOOLS of CHOICE REQUEST 2024–2025 School Year

Full Year Enrollment: January 29 - August 30, 2024 at 3 p.m.  
Second Semester Enrollment: TBD (K-8 Only)

**Residency Status:**

Non-Resident    Fraser Resident Moving Out    Sibling in Building Requested    Within District

**Student First/Middle/Last Name:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Student Grade for 2024-2025 School Year:** \_\_\_\_\_ **Please ✓ if your child has an:**    IEP    504

**Parent/Guardian First/Last Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Alternate Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Address, City, and Zip Code:** \_\_\_\_\_

**District in which you live:** \_\_\_\_\_ **Last School Attended:** \_\_\_\_\_

**School Requested (Face-to-Face): 1st Choice:** \_\_\_\_\_ **2nd Choice:** \_\_\_\_\_

**OR Virtual**  *We partner with a third-party to offer fully virtual option for all K-12 students in the 2024-2025 school year.  
Please indicate a face-to-face school preference above in addition to checking this box.*

**WHEN SUBMITTING A SCHOOLS OF CHOICE APPLICATION, THE PARENT/GUARDIAN MUST PROVIDE STUDENT DISCIPLINARY REPORTS FOR THE PAST TWO SCHOOL YEARS. THE MUST BE OBTAINED FROM THE SCHOOL(S) THE STUDENT ATTENDED DURING THAT TIME.**

**Has your child been suspended (in or out of school) in the last 2 school years?**    Yes    No

**Has your child ever been expelled?**    Yes    No

**SCHOOLS OF CHOICE POLICY:**

**RESIDENT STUDENTS:** Students shall attend the elementary school in the attendance area in which they reside. Exceptions will be made in accordance with the provisions of the Choice Plan.

**NON-RESIDENT STUDENTS:** Section 105, (2), (b) The District shall accept applications for enrollment by non-resident applicants residing within the Macomb Intermediate School District. The District shall refuse to enroll a non-resident applicant if the applicant is or has been within the preceding two years, suspended from another school or if the applicant has ever been expelled from another school.

By signing below, I accept the policies and regulations of Michigan and Fraser Public Schools regarding Schools of Choice. I understand that if at any time it has been discovered the information provided on this form is inaccurate and/or falsified, my child will be ineligible to attend Fraser Public Schools and will be excluded from attendance immediately. I live in Macomb County and am responsible for my child’s transportation.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This form can be returned to [enroll@fraserk12.org](mailto:enroll@fraserk12.org). Please note all registration is by appointment only. Visit [GoToFraser.com](http://GoToFraser.com) for more information.

**(ADMINISTRATIVE USE ONLY)**

**Granted**    **Denied**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **School Assignment:** \_\_\_\_\_

Conditions: All students attending school outside of their attendance areas do so under the following conditions: A non-resident applicant residing within the Macomb Intermediate School District shall not be granted or refused enrollment based on intellectual, academic, artistic, or other ability, talent or accomplishment, or lack thereof, or based on a mental or physical disability, unless a similar resident student would also be excluded. A non-resident applicant residing within the Macomb Intermediate School District shall not be granted or refused enrollment based upon religion, race, color, national origin, sex, height, weight, marital status or athletic ability, or generally, in violation of any state or federal law prohibiting discrimination. Class size may not exceed district guidelines in order to accommodate choice students. The parent must guarantee positive student attendance and behavior in accordance with district policy. Students causing concern in any of the above areas may be transferred back to their assigned schools based on behaviors outlined in the Student Code of Conduct.