

**Bay-Arenac Intermediate School District**

**SCHOOLS OF CHOICE CERTIFICATION**

**District:** \_\_\_\_\_

**School Year:** 2011-2012

We have chosen to participate in the following statutory program(s):

\_\_\_\_\_ Section 105 (districts within Bay and Arenac Counties)

\_\_\_\_\_ Section 105c (districts in counties contiguous to Bay and Arenac Counties)

**Complete if LIMITED positions are available:**

Date advertisement was published: \_\_\_\_\_  
(Cannot be later than the second Friday in August)

Schools and number of positions in each (attached separate list if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates of the application period: \_\_\_\_\_  
(at least 15 days but not more than 30 days)

The determination of which nonresidents will be allowed to enroll and notification of same to the parents/guardians was made within 15 calendar days after the application period.

Yes \_\_\_\_\_ No \_\_\_\_\_

The date by which each applicant must enroll: \_\_\_\_\_  
(The date must be included in the notification to applicants accepted for enrollment)

Were all students enrolled on or before September 9, 2011?

Yes \_\_\_\_\_ No \_\_\_\_\_

If positions became available, additional pupils were allowed to enroll beginning the third Monday in August but no later than the end of the first week of school.

Yes \_\_\_\_\_ No \_\_\_\_\_

**Complete if UNLIMITED positions are available:**

Date advertisement was published: \_\_\_\_\_

Participating schools: All \_\_\_\_\_ Some \_\_\_\_\_ (list specific schools)

Dates of the application period: \_\_\_\_\_

By the end of the first week of school we notified the parent/legal guardian of each non-resident applicant who was accepted.

Yes \_\_\_\_\_ No \_\_\_\_\_

Were all students enrolled on or before September 9, 2011?

Yes \_\_\_\_\_ No \_\_\_\_\_

Did you receive a waiver from the Michigan Department of Education allowing enrollment beyond the statutory date?

Yes \_\_\_\_\_ No \_\_\_\_\_

**If yes, attach a copy of the MDE notification to this form.**

Did your district enroll special education students under the provisions of Section 105c (from districts in counties contiguous to Bay and Arenac Counties)?

Yes \_\_\_\_\_ No \_\_\_\_\_

**If yes, attach any new agreements with the districts of residence for each student.**

I hereby certify that the above statements are true and that all other conditions for enrollment under Section 105 and 105c of the State Aid Act were met.

Printed name of Superintendent or designee: \_\_\_\_\_

Title: \_\_\_\_\_

Signature of Superintendent or designee: \_\_\_\_\_

Date signed: \_\_\_\_\_

**Return completed form with the September Pupil Membership Count desk audit documentation. Please contact Pat Michalski, Student Services Supervisor at 667-3239 if you have any questions.**