

# Old Mission Peninsula School

# STUDENT REGISTRATION

Welcome to Old Mission Peninsula School. We are glad you are here!

The governing authority of each community school and any operator of such school shall distribute to parents of the school upon their enrollment in the school the following statement in writing:

Old Mission Peninsula School is a community school opening in the fall of 2018 under the revised school code of Michigan. The school is a public school and students enrolled in and attending the school are required to take proficiency tests and other examinations prescribed by law. In addition, there may be other requirements for students at the school that are prescribed by law. Students who have been excused from the compulsory attendance law for the purpose of home education as defined by the Administrative Code shall no longer be excused for that purpose upon their enrollment in a community school. For more information about this matter contact the school administration at [info@ompschool.org](mailto:info@ompschool.org), 231-492-0327, or the Michigan Department of Education.

## Student Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Middle Initial: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Gender: \_\_\_\_\_ Current Age: \_\_\_\_\_ Entering Grade: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Telephone: \_\_\_\_\_  
School District in which parent/guardian lives: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's Cell Phone: \_\_\_\_\_  
Mother's Email: \_\_\_\_\_ Mother's Work Phone: \_\_\_\_\_  
Mother's Employer: \_\_\_\_\_  
Father's Name: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_  
Father's Email: \_\_\_\_\_ Father's Work Phone: \_\_\_\_\_  
Father's Employer: \_\_\_\_\_

Ethnicity (optional): Please check the line that applies to this student:  
 Native American  Asian or Pacific Islander  African American  Hispanic/Latino  
 Caucasian, non-Hispanic origin  Other

Student lives with: (check one)  Parents  Father and Step-mother  Mother and Step-father  
 Mother only  Father only  Guardians  Court-appointed guardians  Foster Parents

## Student Information

Is the student/family living in any of the following locations/situations:  YES  NO  
 Unsheltered (on the street)  Sheltered  Transitional Housing  Foster Care (6-month period)  
 Doubled-Up (with friends or relatives)  Hotel/Motel  Unaccompanied Youth

Name of other school-age children living in the home:

Child	Age	Grade	School

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