

**Millis Public Schools
School Choice Form**

Today's Date: _____

Child's Name: _____

Date Of Birth: _____ Current Grade: _____

Grade Applying for: _____ School Year Applying for: _____

Last School Attended: _____

Address Of Last School Attended: _____

Does your son/daughter require special needs services?

Yes _____ No _____

If yes, please state services required: _____

Parent Name: _____

Street Address: _____

City: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Number: _____ Email Address: _____

Is your child currently enrolled in a Spanish Immersion Program? _____yes _____no

For Office Use Only

_____ Accepted _____ Not Accepted _____ Date

Please note that due to new Massachusetts Department of Education legal guidance, beginning in the 2019-2020 school year, students admitted to a district under School Choice do NOT have an automatic right to progress to a regional high school for later grades. However, a regional school district, such as a vocational school, may separately determine whether to participate in school choice and if so, a non-resident student may seek to attend the regional high school through the school's choice program.

**Mail completed form to: Millis Public Schools
245 Plain Street
Millis, MA 02054
Or email to ssarnie@millisschools.org**