

Section 105(c) Allegan Area Schools of Choice Application 2026-2027 School Year

Please complete one application for each child.

Return completed form to your Choice School
Superintendent's Office

If you have questions, please contact your
Choice School Superintendent's Office (see
next page for contact info)

District of Choice: _____

Student's Name: _____ Birthdate: _____

☐ Male ☐ Female Grade (2026-2027): _____ District in Which You Live: _____

District Attended 2025-2026 School Year: _____

Has this student been suspended within the past two years, or **ever** expelled from school?

☐ No ☐ Yes. If yes, please explain (use additional pages if necessary): _____

Does this student have a sibling/member of the same household currently attending the requested district?

☐ No ☐ Yes. If yes, please provide name of student(s): _____

Has this student received special education services? ☐ No ☐ Yes. If yes, please explain briefly: _____

Parent/Guardian Name (please print): _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

By signing below, I acknowledge that I understand the rules, regulations, grading system, transportation expectations and graduation requirements of my Choice School District; I agree to abide by the School of Choice District's requirements; and I agree to provide a birth certificate and immunization records to the School of Choice at the time of registration. Any misleading or incorrect information provided on this form will void this application.

Parent/Guardian Signature: _____ Date: _____

Student (if over 18) Signature: _____ Date: _____

For Choice School Use Only

☐ Applicant Accepted for Enrollment – contacted family (attach copy of "Notification of Acceptance" letter.)

☐ Applicant NOT Accepted for Enrollment – Contacted family (attach copy of "Notification of Non-Acceptance" letter.)

Choice School's Representative Signature: _____ Date: _____

Allegan Area Schools of Choice Program

For more information, contact one of the following participating districts:

Allegan Public Schools

James Antoine, Superintendent, 550 Fifth Street, Allegan, MI 49010
Phone: (269) 673-5431 Fax: (269) 673-5463

Fennville Public Schools

Doug Greer, Superintendent, 5 Memorial Drive, Fennville, MI 49408
Phone: (269) 722-3350 Fax: (269) 722-3351

Glenn Public School

Jamie Walle, Superintendent, 1394 Adams, P.O. Box 69, Glenn, MI 49416
Phone: (269) 227-3411 Fax: (269) 227-5375

Hopkins Public Schools

Scott VanBonn, Superintendent, 400 Clark Street, Hopkins, MI 49328
Phone: (269) 793-7261 Fax: (269) 557-7919

Martin Public Schools

Samantha Ball, Superintendent, 1556 Chalmers Street, Martin, MI 49070
Phone: (269) 442-0500 Fax: (269) 442-0501

Otsego Public Schools

Dr. Christie Robinson, Superintendent, 400 Sherwood Street, Otsego, MI 49078
Phone: (269) 694-7900 Fax: (269) 694-7999

Plainwell Community Schools

Matt Montange, Superintendent, 600 School Drive, Plainwell, MI 49080
Phone: (269) 685-5823 Fax: (269) 685-1108

Wayland Union Schools

Tim Reeves, Superintendent, 850 East Superior Street, Wayland, MI 49348
Phone: (269) 792-2181 Fax: (269) 792-1615

Allegan Area Educational Service Agency

Bill Brown, Superintendent, 310 Thomas Street, Allegan, MI 49010
Phone: (269) 512-7700 Fax: (269) 512-7702