

# Application for 2026-2027

## TRENTON PUBLIC SCHOOLS - Schools of Choice Program



- **One application form per child** must be received at the Central Office by **4:00 pm July 30, 2026**.
- Questions should be directed to the Central Office – attn: Julie Drabczyk at [drabczyk@trentonschools.com](mailto:drabczyk@trentonschools.com) or call 734-692-4511

| Student Information                                                                                                                                                                                                                                                                                                                                                                                                    |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|
| Student Name/Requested Grade:                                                                                                                                                                                                                                                                                                                                                                                          | Birthdate:      |
| Address:                                                                                                                                                                                                                                                                                                                                                                                                               | Parent's Email: |
| City/State/Zip:                                                                                                                                                                                                                                                                                                                                                                                                        | Home Phone:     |
| Resident District:                                                                                                                                                                                                                                                                                                                                                                                                     | Work Phone:     |
| Parent / Guardian:                                                                                                                                                                                                                                                                                                                                                                                                     |                 |
| <b>Please list the current school district and grade of your child. If your child is entering Y5K/K, please list the preschool and/or early childhood program that was attended.</b>                                                                                                                                                                                                                                   |                 |
| <b>Please list any additional support that your child may need. If you would like to meet to discuss, please check the box below and provide a brief explanation:</b><br><input type="checkbox"/>                                                                                                                                                                                                                      |                 |
| Has your child ever been expelled from school? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain (attach additional paper or write on back).                                                                                                                                                                                                                                             |                 |
| Has your child been suspended from any school in the last two years? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: (attach additional paper or write on back).                                                                                                                                                                                                                      |                 |
| K-12 Sibling Information                                                                                                                                                                                                                                                                                                                                                                                               |                 |
| If you have another child that is currently enrolled in TPS, please complete the information below                                                                                                                                                                                                                                                                                                                     |                 |
| Sibling Name                                                                                                                                                                                                                                                                                                                                                                                                           | Entering Grade  |
|                                                                                                                                                                                                                                                                                                                                                                                                                        |                 |
| Please explain any sibling suspensions/expulsions:                                                                                                                                                                                                                                                                                                                                                                     |                 |
| Parent Signature                                                                                                                                                                                                                                                                                                                                                                                                       |                 |
| By signing at the top of the next page, I acknowledge that I have been provided a copy of and accept the policies and regulations of Trenton Public Schools. I also understand that incomplete, inaccurate, or false information I have provided may invalidate the application. <b>If my child is accepted as a Schools of Choice student, I also understand that transportation shall be my sole responsibility.</b> |                 |
| Parent/Guardian Signature:                                                                                                                                                                                                                                                                                                                                                                                             | Date:           |
| Student Signature (if 18 or older):                                                                                                                                                                                                                                                                                                                                                                                    | Date:           |

## **Deadlines-2026-27 School of Choice**

- **Application Timeline: July 20, 2026 – July 30, 2026 (applicants will be notified starting August 3, 2026)**
- Parents notification will begin on August 3, 2026. The process will be completed by August 6, 2026.
- Parents confirm their decision to attend by **August 31, 2026**.
- Waitlist families will be notified by August 17, 2026.

### **Schools of Choice Information (for more information, please contact TPS at 734-692-4511)**

1. If the number of applications for a specific grade level or program exceeds the number of available spaces, applicants will be selected through a lottery process and must meet all other Choice requirements.
  2. If a sibling of a School of Choice (SOC) enrollee wishes to enroll in Trenton Public Schools (TPS) and the District is accepting SOC students in the sibling's grade level, the sibling will have priority status for that grade and will not be subject to the lottery. The sibling must meet all eligibility requirements.
  3. There will be no tuition or other enrollment costs associated with SOC students attending TPS other than those costs that are expected of all students attending TPS (instrumental equipment rental, activity fees, etc.).
  4. SOC students are expected to adhere to all rules and regulations, the Student Code of Conduct, and policies of TPS. In addition, they must comply with all School of Choice legislative rules and regulations.
  5. Once a SOC student is accepted, he/she may maintain enrollment for the remainder of his/her educational career without re-submitting to the SOC process. However, should a specific class become overcrowded, due to increased residential enrollment, or other circumstances deemed necessary by the Superintendent of Schools, SOC and Limited Open Enrollment students may be required to move to a classroom/school with lower enrollment within the District.
  6. Students who have been expelled from any school district and/or school, public or private, are not eligible for enrollment in TPS.
  7. Students who have been suspended from any school district and/or school, public or private, within the past two years, may not be eligible for enrollment in TPS.
  8. SOC students who are eligible for special education programs will be subject to the same placement procedures as all students attending TPS and may be placed in appropriate programs outside the TPS.
  9. SOC students entering Trenton High School will be scheduled classes as determined by the school counselor and based on availability.
- **In compliance with Title VI of the Civil Rights Act of 1964, Title IX, of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disability Act of 1990, and the Elliott-Larsen Civil Rights Act of 1977, it is the policy of the Trenton Public Schools that no person shall on the basis of race, color, religion, national origin or ancestry, gender, age, disability, height, weight, or marital status be excluded from participation in, be denied the benefits of or be subjected to discrimination during any program, activity, service or in employment. For information contact the Office of the Superintendent, 2603 Charlton Road, Trenton, Michigan 48183 (734) 676-8600**
  - **Please be advised that the Schools of Choice eligibility rules are governed by the Michigan Compiled Laws under MCL 380.1401, 388.1606, 388.1705, 388.1705c and 388.1707. By signing this application, you attest that all information provided is true and accurate. You further acknowledge that providing false information is in violation of law. The District retains the right to request additional verification of your eligibility at any time. Should information be provided or discovered by the district that you were accepted into the Schools of Choice program illegally, such acceptance will be revoked immediately.**



DISTRICT VERIFICATION  
OF PRIOR DISCIPLINE HISTORY

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Incoming Grade \_\_\_\_\_

**A willful false statement of this affirmation will result in a report to the appropriate authorities and automatic disqualification.**

**DIRECTIONS:** Sign the permission below, check and sign either option 1 or 2. Return this form with application/enrollment.

I give permission to representatives of Trenton Public Schools to send a verification of discipline records to any and all school districts noted on my student's application/enrollment form.

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

**Option 1:**

☐ The undersigned affirms that \_\_\_\_\_ **has not been suspended or expelled** from any public or private school in Michigan or any other state.

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

**Option 2:**

☐ The undersigned affirms that \_\_\_\_\_ **has been suspended or expelled from** a public or private school in Michigan or other state. If checked, please attach a detailed explanation of the circumstances. Include school name, dates of suspension or expulsion, and a description of the incident giving rise to the suspension or expulsion.

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

**FOR USE OF LAST SCHOOL ATTENDED**

Name and City of Last School attended \_\_\_\_\_

The above named student has requested enrollment in the Trenton Public Schools. We are requesting information about his/her discipline history. Please fill out and sign this form regarding the above named student.

\_\_\_\_ No record of suspension or expulsion from this school district

\_\_\_\_ Expelled Date/Violation/Infraction \_\_\_\_\_ Suspended

Date/Violation/Infraction \_\_\_\_\_

\_\_\_\_\_  
Signature Position Phone \_\_\_\_\_ School Official

Response Date \_\_\_\_\_

Fax completed form to: Trenton Public Schools (Enrollment) @ 734-676-4851 or email to [drabczykj@trentonschools.com](mailto:drabczykj@trentonschools.com)

-----  
**FOR TRENTON PUBLIC SCHOOLS OFFICE USE ONLY:**

Date Trenton Public Schools sent for verification \_\_\_\_\_ By \_\_\_\_\_