



Milwood Magnet School  
2916 Konkle Street  
Kalamazoo, MI 49001

T: 269.337.0670  
F: 269.337.1628

www.milwoodmagnet.org

**OFFICE USE ONLY**

Date received: \_\_\_\_\_ Application No: \_\_\_\_\_

Accepted Date: \_\_\_\_\_

Declined Date: \_\_\_\_\_

## APPLICATION FOR ENROLLMENT MILWOOD MAGNET SCHOOL (Grades 6-8) 2009 – 2010 School Year

Mail this completed form by February 25, 2009 to:

Magnet Programs and Recruiting  
c/o Kalamazoo Public Schools  
1220 Howard Street  
Kalamazoo, MI 49008

Please call 269.337.1129 if you have any questions.

### 1. PARENT/GUARDIAN INFORMATION

Name(s): \_\_\_\_\_ Title(s) Mr., Mrs., Ms., Dr. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### 2. STUDENT INFORMATION

| Name<br>(First, Last) | Gender<br>(Male/Female) | Race*<br>(See Key Below) | Birth Date<br>(MM/DD/YY) | Grade Level<br>(09-10 School Yr.) |
|-----------------------|-------------------------|--------------------------|--------------------------|-----------------------------------|
|                       |                         |                          |                          |                                   |
|                       |                         |                          |                          |                                   |

\*Please select category that most appropriately describes your ethnicity.

(1) American Indian or Alaskan Native (2) Black, not Hispanic (3) Asian or Pacific Island (4) Hispanic (5) White

New state legislation (PAB8 and 89 of 1995) mandates the collection of multi-racial data separate from the five major racial ethnic categories.

3. Do you consider yourself to be multi-racial (of mixed racial-ethnic origins)?  Yes  No

4. Has your child(ren) ever been a student in Kalamazoo Public Schools?  Yes  No

5. Has your child(ren) attended school in Michigan this school year?  Yes  No

6. Does your child currently receive any special services?  Yes  No

7. If receiving special services, please indicate in what area: \_\_\_\_\_

8. Last School Attended (Name): \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_