

Detroit Public Schools

REGISTRATION APPLICATION 2011- 2012

Supplemental Educational Services (SES) – “FREE TUTORING”

Student’s Name:
Address:

Print all the information requested accurately and clearly.

Complete one application per child. Check ONLY Option 1 or Option 2. Check Option 1 for FREE TUTORING. Check Option 2 only if you choose NO FREE TUTORING. Return this signed registration form to the Office of Title I/Section 31a Compliance on or before the deadline of Monday, October 31, 2011 in the enclosed envelope or hand-deliver to:

DETROIT PUBLIC SCHOOLS
Office of Title I/ Section 31a Compliance
3011 W. Grand Blvd, Fisher Bldg. Suite 450
Detroit, MI 48202
Call Center: (313) 873-3215

Form with fields for Student’s Name, Student ID#, Address, Zip, New Address Yes () No (), Home Phone, Alt. or Cell #, Parent/Guardian Name, School, Grade, DOB, and My child is currently enrolled in Special Education at a Detroit Public School: Yes () No ()

IF YOU CHOOSE FREE TUTORING YOU CANNOT CHANGE TO PUBLIC SCHOOL CHOICE TRANSFER OPTION FAXED APPLICATIONS WILL NOT BE ACCEPTED

Parent/Guardian Statement:

I have received and understand the information regarding the FREE Supplemental Educational Services (SES) and I have selected an option below:

OPTION 1: (You MUST select two (2) different Providers in order of PRIORITY)

1st Selection: I choose (Provider Name) for FREE Supplemental Educational Services

2nd Selection: I choose (Provider Name) for FREE Supplemental Educational Services

OPTION 2:

I choose NOT to have FREE Supplemental Educational Services provided for my child.

Parent/Guardian Signature

Date

By signing this form, (1) I understand that my child will only receive the services that he/she is eligible for, and (2) I give Detroit Public Schools permission to share my child’s information given above with the Provider I choose to provide the “free tutoring” services.