

# Lake Superior Academy

---

Dear Parents or Guardians:

Thank you for your commitment in enrolling your child at the Lake Superior Academy.

Please complete this enrollment form and **attach copies of the required documents listed on the checklist below**. Please check every item below that is included with this enrollment form. This completed form and all the documents listed below must be returned via email ([susieschlehuber@choiceschools.com](mailto:susieschlehuber@choiceschools.com)), USPS (see mailing address on enrollment form.) or delivered to the school's office during open office hours.

Upon receipt of the completed application package, we will set up a time for you to meet with the Head of School or a designee for an overview of expectations, school philosophy, complete any remaining paperwork and to answer any remaining questions.

## Registration Checklist

- **Copy of Birth Certificate**
- **Copy of Immunization Record**
- **School Tour**

***The student will not be able to enroll unless all the above paperwork is turned in and a school tour has been completed. Paperwork and tour must be completed prior to the finalization of enrollment.***

If you have any questions, please do not hesitate to call 906-259-1168. Again, thank you for your interest in our school and we are looking forward to an exciting school year.

Sincerely,

Susie Schlehuber, Head of School  
Lake Superior Academy

Date Enrollment Complete –

\_\_\_\_\_

Initials - \_\_\_\_\_

Birth Certificate  
Immunizations  
School Tour

# Lake Superior Academy

Final enrollment for  
grades K-5

## 2022 – 2023 Student Enrollment Form

Shot Records  
Birth Certificate  
Photo Permission  
Internet Permission  
Emergency Cards  
Parent Contract

ALL FORMS MUST BE COMPLETED and a SCHOOL TOUR MUST HAVE BEEN TAKEN FOR REGISTRATION TO BE COMPLETE.

**PLEASE PRINT OR TYPE. FILL OUT ONE FORM PER STUDENT.**

Student's Name:

Last

First

Middle

Date of birth:

Age:

Male or Female (circle)

Grade to Enter (circle) K 1 2 3 4 5

Students Home Address

Phone/Cellular

City

State

Zip Code

Email Address

Present School:

Present Grade:

Social Security Number:

- -

What School District does the student reside in? \_\_\_\_\_

\*Has student ever received Special Education services, Speech, or 504 accommodations? Yes / No (circle) If yes, what type of program? \_\_\_\_\_

\*Has the student ever been **expelled**? Yes / No (circle). If yes, please explain, \_\_\_\_\_

\*Are there any custody arrangements of which the school should be made aware? Yes / No (circle) If yes, please explain. \_\_\_\_\_

**PLEASE ATTACH ANY ADDITIONAL INFORMATION WHICH CLARIFIES THE ABOVE \*QUESTIONS.**

Brothers and sisters if applying – Additionally, please complete a separate form for each sibling applying.

Name:

Age:

Grade Sept. 2022:

Present School:

Name

Age

Grade Sept. 2022:

Present School:

### Family Information

☆ Language Spoken in Home: \_\_\_\_\_

Mr., Mrs., Ms.

(circle)

Parent/Guardian's Full Name

Relationship to Student

Home Address (if different than student)

Home Phone (if different than student)

Work Phone Number/Cellular

Mr., Mrs., Ms.

(circle)

Parent/Guardian's Full Name

Relationship to Student

Home Address (if different than student)

Home Phone (if different than student)

Work Phone Number/Cellular

Signature of Parent/Guardian

Today's Date

*LSA provides equal access to public education for all students, regardless of "intellectual or athletic ability, measures of achievement or aptitude and status as a handicapped person."*

Please sent completed form to:

Lake Superior Academy  
Registrar's Office  
PO Box 46  
Dafter MI 49724-0046

# Lake Superior Academy

---

## Family Information

Student's Name: \_\_\_\_\_ Entering Grade: \_\_\_\_\_

Parent/Legal Guardian's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Who should be contacted in case of emergency if parent/legal guardians are unavailable? \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Phone: \_\_\_\_\_

Is there any additional information we should know about your family? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## Health and Emergency Information

Does your child have any allergies or medical conditions? (circle) Yes / No

If yes, list and describe symptoms: \_\_\_\_\_

Does your child take any medications (circle) Yes / No

If yes, please list: \_\_\_\_\_

**All medications must be kept with and administered by a school official with a parental note or written doctor's orders. No child will be allowed to carry or administer his/her own medication. A copy of a physical exam in the past year must be kept on record at the school health office.**

Doctor: \_\_\_\_\_

Address: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_

Is your child covered by medical insurance? (circle) Yes / No

If yes, please list:

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_

# Lake Superior Academy

---

## Release of Information

As parent/guardian of \_\_\_\_\_ who is enrolling at Lake Superior Academy, I authorize the release of current school information and ask that a transcript and/or test records and other relevant information be sent directly to:

Lake Superior Academy  
Registrar's Office  
PO Box 46  
Dafter MI 49724-0046  
Phone: 1.906.440.0091

---

Parent/Guardian Signature

Date

# Lake Superior Academy

---

Student's Name 

---

## PERMISSION TO USE STUDENT PHOTOGRAPHS

(K – 5)

Lake Superior Academy has my permission to use photographs of the above-named student for marketing purposes. Such photographs may appear in newspapers, magazines, websites, brochures, slide shows, or other publicity materials without any compensation or prior approval.



Parent/Guardian Signature

Date

---

# Lake Superior Academy

---

## RELEASE OF STUDENTS TO PERSONS OTHER THAN PARENTS/GUARDIANS

Grades K – 5

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_ Grade: \_\_\_\_\_

Person(s) AUTHORIZED to pick up student from Lake Superior Academy (other than parent or guardian):

Name/Relationship	Address	Phone

Person(s) specifically RESTRICTED FROM picking up students from Lake Superior Academy:

Name/Relationship	Address	Phone

# Lake Superior Academy

## RACE/ETHNICITY DATA COLLECTION FORM

Dear Parents and or Guardians:

The U.S. Department of Education has issued new guidelines regarding the collection of data on ethnicity and race of the public school students. The federal government requires all states to collect this information and has developed new reporting categories designed to provide a more accurate picture of the nation's ethnic and racial diversity. At this time, we are asking the parents and guardians of all current students to complete the brief form below to update information about their children's ethnicity and race. The federal government requires that both ethnicity and race be identified and provides only the categories listed. If you do not answer both questions, school personnel are required to make selections for you.

Student's name: \_\_\_\_\_

Grade: \_\_\_\_\_

<p>Is your child's native tongue a language other than English? YES / NO</p> <p>What is the language? _____</p> <p>Is the primary language used in your child's home or environment a language other than English? YES / NO</p> <p>What is the language? _____</p>	<p><b>Office Use:</b> If yes, obtain additional form</p>
--	--

Please answer **BOTH** questions.

1. **Is your student of Hispanic/Latino origin?** (A person of Cuban, Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.)

\_\_\_\_ Yes \_\_\_\_ No

2. **What is your student's race? (Please mark all that apply)**

**American Indian or Alaska Native** – a person having origins in any of the original peoples of North and South America (including Central America), who maintains a tribal affiliation or community attachment.

**Asian** – a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**Black or African American** – a person having origins in any of the Black racial groups of Africa

**Native Hawaiian or other Pacific Islander** – a person having origins in any of the original peoples of Hawaii, Guamanian, Samoan, or other Pacific Islands.

**White** – a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**I choose not to provide** the above data for my student. I understand that Lake Superior Academy and the State of Michigan are required to provide this information to the federal government. I understand that Lake Superior Academy will be required to select race and ethnicity categories on my behalf. \_\_\_\_\_

(Please initial)

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# Lake Superior Academy

---

Lake Superior Academy, and the parents of the students participating in activities, services, and programs funded by Title I, Part A of the Elementary and Secondary Education Act as amended by the No Child Left Behind Act of 2001, agree that this compact outlines how the parents, the entire school staff, and the students will share the responsibility for improved student academic achievement and the means by which the school and parents will build and develop a partnership that will help children achieve the state of Michigan's high standards.

## A. TEACHER AGREEMENT

The staff of the Lake Superior Academy will provide:

1. high quality curriculum and instruction.
2. a supportive environment to provide the opportunity for all students to meet the State of Michigan Performance Standards.
3. ongoing, meaningful two-way communication regarding student progress including:
  - a. annual Parent Teacher Conferences
  - b. Interim Reports each term when applicable,
  - c. distribution of report cards three times a year or once per term.
4. opportunities to be involved in school programs.
5. high expectations for every student in order to encourage full learning potential.
6. respect for all students, parents and diverse cultures represented in our school.
7. an environment that displays caring, concern, and advocacy for every student.

Teacher Signature: \_\_\_\_\_

## B. PARENT/GUARDIAN AGREEMENT

1. seeing that my child arrives to school on time and attends school regularly.
2. supporting the staff in its efforts to maintain proper discipline.
3. encouraging my child's efforts to do his/her best.
4. providing a quiet place for homework and encouraging my child to complete every assignment.
5. promoting positive attitudes about school.
6. read and review all school issued notices including but not limited to the Parent Update, Student Handbook, Friday folders and all other applicable notices.
7. read, review, and sign the Contract of Responsibilities for Parents/Guardians.
8. monitoring my child's academic progress by reviewing graded exams/assignments, the homework diary and other strategies.

Parent/Guardian Signature: \_\_\_\_\_

## C. STUDENT AGREEMENT

It is important that I work to the best of my ability. Therefore, I shall strive to do the following:

1. finish and turn in my assigned homework and participate in classroom activities.
2. read the student handbook and follow all school rules/expectations.
3. set aside a regular time and place each night to read for at least 30 minutes.
4. ask someone I trust for help when I need to.
5. deliver to my parent/guardian all notices, newsletters and information received by me from my school every day.

Student Signature: \_\_\_\_\_ Grade/Section \_\_\_\_\_



# Lake Superior Academy

---

## CONTRACT OF RESPONSIBILITIES

### Parent/Guardian

As a parent/guardian of \_\_\_\_\_, a student attending the Lake Superior Academy, I acknowledge and agree to the following statement:

- I affirm that the school's staff/administrators have thoroughly explained the philosophy of education, including the school's college preparatory mission, rigorous academic program, and high behavioral expectations, and that they have answered all of my questions regarding the educational program. The school's program and methodologies have been explained to me, including the testing, pacing charts, Intensives, and the curriculum.
- I understand that grade-level placement is a function of a series of tests that determine student academic attainment and identify pre-existing academic gaps and that students, while admitted, are not necessarily placed in a grade level of their choice.
- I do understand that once there are more applicants than available places, an open lottery will be conducted in compliance with state and federal law and regulation.
- I exercised my free choice to enroll my child in this public-school academy. I, therefore, believe in the school's mission, its strong emphasis on academic mastery, its rejection of the practice of "social promotion", its insistence on high academic and behavioral expectations for all students, its emphasis on maintaining a clean, safe, and orderly environment, and its firm, low-tolerance for disruptive behavior or bullying. I will cooperate with the school to maintain these high standards.
- A safe, serious, and orderly school environment is essential in order for my child and his/her classmates to achieve academic success. The right of all students to pursue their education in a classroom environment that is free from disruptive behavior is a very basic student right. I will insist that my child adhere fully to the school's code of conduct, including treating fellow students and staff with respect, and therefore, I will support the school's commitment to a high standard of behavior. I acknowledge that my child may be suspended or expelled (in compliance with state and federal law and regulation) from this school of choice if he or she violates the school's rules and policies. I will read, sign, and abide by the school's policies as outlined in the school's handbook and as adopted from time to time by the Board of Directors and/or the school's administration.
- I will make sure my child arrives at school on time, in compliance with the school's dress code, and attends all of his/her classes prepared to work and learn, because I recognize that consistent school attendance is directly related to the academic success of my child. I also recognize that there are consequences for failure to adhere to the school's strict rules and policies.

# Lake Superior Academy

---

- I will make myself available, whenever requested, to meet with the school administration about my child's progress, and if for some reason I am unable to attend, I will be available by telephone or by email. In addition, I will be an active partner with the school in my child's education by committing to participate in parent-teacher conferences.
- I will respond promptly to school communication (e.g. permission slips, surveys, phone calls, etc.) and will immediately provide updated emergency contact information.
- I accept accountability as a parent/guardian of a child attending this charter school by accepting responsibility for my actions.

I fully understand and accept the philosophy of the Lake Superior Academy. Given that I place a high value on an excellent educational experience for my child, that I realize the importance of a safe, effective, and rigorous school for my child and my community, and that I recognize my own responsibility to help make the school a success, I hereby accept the statements of parental responsibilities listed above.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: This public school academy is a school of choice. This means that no child is "assigned" to attend this school. As such, a parent's affirmative act of "choosing" to send a child to this school is seen as an acknowledgement that he/she not only understands this school's unique mission, its rigorous academic standards, and its high behavioral expectations, but also embraces its philosophy. Public school academies cannot, and should not, be all things to all people. Schools that try to be usually fail. Instead, this public school academy will remain true to its Montessori educational mission. To achieve its mission, it will not compromise and will place a heavy focus on Grace and Courtesy and academic standards and expectations that align with the Montessori philosophies.

# Lake Superior Academy

---

Lake Superior Academy  
PO Box 46  
Dafter MI 49724-0046

Dear Parent/Guardian,

Your child will have an opportunity to use the Lake Superior Academy's Internet connection for educational purposes while in school. There are many opportunities for your child to utilize the Internet such as researching topics and completing online assessments and skills building activities. However, in order to utilize the Internet, an agreement must be signed and on file at the Academy.

Please review the agreement carefully. Access to the Internet is a privilege, not a right. Inappropriate use not only reflects on the Academy, but may lead to penalties, including revocation of privileges, disciplinary action and, if warranted legal action.

Upon review of the attached with your child, please **sign and return Copy B** of the form to the Academy and this will be kept on file in the Director's Office. Please note that **your child also needs to sign the form** before it is returned. Copy A is for your records to keep on file.

Please don't hesitate to contact me at the Academy if you have further questions.

Sincerely,

Susie Schlehuber  
Head of School

# Lake Superior Academy

---

Through Lake Superior Academy's Internet connection, students have an unparalleled opportunity to participate in a global community of information and learning. With such an opportunity comes responsibility. For a student at the Lake Superior Academy to use the Internet, he or she must comply with the following rules and sign the agreement. A parent or legal guardian must also sign the agreement.

## **STUDENT USE POLICY FOR INTERNET CONNECTION**

The Lake Superior Academy's Internet connection is intended for educational purposes only. Access to the Internet is a privilege, not a right. Inappropriate use not only reflects on the Academy, but may lead to penalties, including revocation of privileges, disciplinary action and, if warranted, legal action. Among unacceptable uses of the Internet are the following:

- Use at school for non-school related activities.
- Use in violation of federal, state or local laws, including sending or receiving copyrighted matter without permission.
- Commercial use.
- Sending patently harassing, intimidating, abusive or offensive material to or about others, in messages public or private.
- Sending chain letters or pyramid schemes, "broadcasting" inappropriate messages to lists or individuals, and any other kind of use that would congest the Internet or otherwise interfere with the work of others.
- Sending or receiving pornographic material, inappropriate text files or files dangerous to the integrity of the network.
- Vandalizing, defined as attempting to change any items not belonging to you, or harm or destroy the work, systems or data of another user, including uploading or creation of computer viruses.
- Engaging in the illegal distribution of software ("pirating").
- Knowingly using another person's password or misrepresenting your identity, or giving one's own password to others.
- Failing, when downloading information, to comply with any associated terms or conditions specified by the supplier of that information.
- Expressing views or opinions not clearly identified as your own and not those of the Academy.
- Circumventing security measures on school or remote computers or networks.

## **EMAIL**

All of the foregoing also applies to the use of E-mail.

E-mail is not like a letter in an envelope. E-mail is like a postcard. The contents of your message are out in the open. There is no easy way to mark a message "confidential."

Your message may be viewed during the mailing process. Your message, if inadequately addressed, may be read by a "postmaster" trying to redirect it correctly. Your message may be forwarded or printed. Your message may be stored, perhaps in the directories of the person who receives the message, indefinitely.

People who may never meet you will be forming impressions about you based on the way you compose your E-mail messages.

# Lake Superior Academy

---

## AGREEMENT

Lake Superior Academy is not liable for the actions of anyone connecting to the Internet. All users shall assume full liability, legal, financial or otherwise, for their actions.

Lake Superior Academy takes no responsibility for any information or materials transferred through the internet.

Lake Superior Academy makes no guarantees, implied or otherwise, regarding the reliability of the data connection. Lake Superior Academy is not liable for any loss or corruption of data resulting while using the Internet.

Lake Superior Academy reserves the right to examine all data stored in the machines involved in the Internet link to ensure that all users are in compliance with these regulations.

Although each student has an individual password to access the system, it belongs to the Academy, and all E-mail messages are school records. No student should have any expectation of privacy as to his or her use of the Internet or E-mail. The Lake Superior Academy reserves the right, for legitimate school purposes, to access and disclose the contents of students' electronic communications without regard to content, and to conduct periodic, unannounced inspections of E-mail communications.

# Lake Superior Academy

---

## ACKNOWLEDGEMENT

I, \_\_\_\_\_, have read Lake Superior Academy's student use policy for internet connection and I accept and agree to abide by all rules.

Signed: \_\_\_\_\_  
Student's Signature

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

I, \_\_\_\_\_, the parent or guardian of the above, agree to indemnify, protect and hold harmless the Lake Superior Academy, its employees and agents, and all other organizations related to the Academy's Internet connection from any claim or liability whatsoever, whether in contract, tort or otherwise, that may result from my child's use of the Internet and E-mail.

Signed: \_\_\_\_\_  
Parent/Guardian's Signature

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

**Copy A – Parent/Guardian of Student to Retain this copy**

**KEEP THIS COPY FOR YOUR RECORDS**

# Lake Superior Academy

---

## ACKNOWLEDGEMENT

I, \_\_\_\_\_, have read the Lake Superior Academy's student use policy for internet connection and I accept and agree to abide by all rules.

Signed: \_\_\_\_\_  
Student's Signature

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

I, \_\_\_\_\_, the parent or guardian of the above, agree to indemnify, protect and hold harmless the Lake Superior Academy, its employees and agents, and all other organizations related to the Academy's Internet connection from any claim or liability whatsoever, whether in contract, tort or otherwise, that may result from my child's use of the Internet and E-mail.

Signed: \_\_\_\_\_  
Parent/Guardian's Signature

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

**Copy B – THIS COPY MUST BE RETURNED TO LAKE SUPERIOR ACADEMY IMMEDIATELY.**

# Lake Superior Academy

## STUDENT/FAMILY RESIDENCY QUESTIONNAIRE

This questionnaire is in compliance with the McKinney-Vento Act, U.S.C. 42 § 11431 et seq. Your answers will help determine if the student(s) meets eligibility requirements for services under the McKinney-Vento Act.

**Please choose which of the following situations the student (s) currently resides in:** *(You can choose more than one)*

- House or apartment with parent or guardian
- Motel, car, or campsite
- Shelter or other temporary or transitional housing
- With friends or family members (without parent/guardian)
- With friends or family members (in addition with parent/guardian)
- In housing that lacks adequate heat, running water or electricity

**If the student(s) is living in shared housing, please check all of the following reasons that apply:**

- Loss of housing
- Economic situation
- Temporarily waiting for house or apartment
- Providing care for a family member
- Living with boyfriend/girlfriend
- Loss of employment
- Parent/Guardian is deployed
- Parent/Guardian is incarcerated
- Other family hardship \_\_\_\_\_
- Other (Please explain) \_\_\_\_\_

**Is the student under the age of 18 and living apart from parents or guardians? Yes No**

If yes, who is the student's primary caregiver? \_\_\_\_\_ Relationship \_\_\_\_\_

<b><u>STUDENT(S) NAMES</u></b>						
<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>M/F</i>	<i>D.O.B.</i>	<i>Grade</i>	<i>School Name</i>

***Please list any other children who also live in the home, but are not attending school:***

<b><u>STUDENT(S) NAMES</u></b>						
<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>M/F</i>	<i>D.O.B.</i>	<i>Age</i>	<i>If child is under 5, does he/she attend a preschool program?</i>

**Students without fixed, regular, and adequate living situations have the following rights:**

- 1) Immediate enrollment in the school they last attended or the local school where they are currently staying even if they do not have all of the documents normally required at the time of enrollment without fear of being separated or treated differently due to their housing situations;
- 2) Transportation to the school of origin for the regular school day;
- 3) Access to free meals, Title I and other educational programs, and transportation to extracurricular activities to the same extent that it is offered to other students.

**By signing below, I acknowledge that I have received and understand the above rights. Any questions about these rights can be directed to the local McKinney-Vento Liaison at 906-259-1168 ext 1, or the State Coordinator at 517-488-9161.**

Parent/Guardian/Student Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

(Area Code) Phone number \_\_\_\_\_ Street/Contact Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_