

**Franklin Northeast Supervisory Union  
Application for School Choice  
(Grades 9-12)**

I want to participate in school choice. I may choose up to three high schools that I wish to attend. I am currently a student at \_\_\_\_\_.

Next year I will be in grade \_\_\_\_\_.

I wish to attend the following school(s) in order of preference. If I don't get my first choice because a school has reached school choice capacity, I will be considered for my second and then third choice. No student is required to have a second or third choice.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

A lottery system will be in effect if the number of students exceeds school capacity.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

\_\_\_\_\_

Phone: \_\_\_\_\_

*Return this form to the guidance office in your present school by March 1<sup>st</sup>. Students will be notified of the status of their applications in writing by April 1<sup>st</sup>.*