



1903 Wilkins | Detroit, MI 48207 | Office (313) 833-1100 | Fax (313) 833-8653 | [www.detroitedisonpsa.org](http://www.detroitedisonpsa.org)  
**Ralph C. Bland – Superintendent**

Student Last Name: \_\_\_\_\_ Student First Name: \_\_\_\_\_

Grade Level Applying For: \_\_\_\_\_ School Year: **2022-2023**

## Registration Checklist - Kindergarten



***Missing Documentation will be marked only!***

- DEPSA Application Cover Sheet**
- Copy of Parent Identification
- Original Birth Certificate
- Immunization Record
- Student Discipline Record Form
- Health Appraisal
- IEP, Psychological Report, Speech Report, MET Report, Exit IEP (2copies) only if applicable
- 504 Plan with medical documentation
- Development History Checklist
- Current Report Card/Progress Report/COR assessment or Pre-school assessment
- District Assessments i.e. NWEA / Ed Performance (K – 8<sup>th</sup> Grade Applicants)
- Home Language Survey

“Intelligence plus character – that is the goal of true education.”

- Martin Luther King

Comment:

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*Please contact the Registrar's Office for any questions at 313-833-1100 ext. 1211.*



## Kindergarten Application Process

2022-2023 Academic School Year

Deadline Friday, April 1, 2022

Please Read Through Carefully

### Application Deadline:

1. All applications for admission **must be postmarked or delivered by Friday, April 1, 2022**. Mailed applications can be mailed to the attention of: **The Registrar at Detroit Edison Public School Academy, 1903 Wilkins, Detroit, Michigan 48207**.
2. Parents/Guardians of students interested in applying to DEPSA may obtain applications in the school's Main Office or on school's website at [www.detroitedisonpsa.org](http://www.detroitedisonpsa.org).
3. **A separate application MUST be submitted for each child who is applying for admission**. DEPSA cannot consider a sibling preference unless each application clearly states the name(s) of sibling(s) either currently enrolled or also applying for admission. DEPSA defines siblings as a brother or sister living within the same household.

### Enrollment Procedures for New Students:

1. All complete applications that Detroit Edison Public School Academy receives by 3:30 p.m. on **Friday, April 1, 2022** will be eligible for lottery selection.
2. All applications **must** include a copy of the requested supporting documents (copy of parent's license, Michigan identification card, parent id, or passport, birth certificate—original may be requested, report card/development checklist, eye exam and immunization record and health appraisal. **If for any reason, upon receipt, all information is not complete on the application and/or requested documentation is missing, the application will not be considered for acceptance or waiting list status.**
3. According to state law, all applicants applying for admission for Kindergarten must be age five (5) by September 1<sup>st</sup> of the year in which they are applying. If any applicant applying for Kindergarten is accepted, but is proven not to be five (5) by the required date, they will automatically be dropped from enrollment.
4. Applicants for grades that are not oversubscribed will be enrolled next, and their siblings will also be given preference. However, preference does not mean your child is guaranteed a slot.
5. **In the event of oversubscribed grades, a random selection lottery will be used to select students. All applicants for grades that are not oversubscribed as of Friday, April 1, 2022 will be automatically enrolled.**
6. Once all slots are filled for any given grade, the remainder of the applicants will be placed on an official Waiting List for that grade in the order in which the name is drawn in the lottery. **If DEPSA receives an application after the deadline, the applicant's name will be added to the end of the Waiting List in the order in which the application is received.**
7. Applicants will receive a **Confirmation Letter by mail or email of acceptance/waiting list status.**



8. If applicants are still on a Waiting List as **of February 9, 2023** of the school year in which they have applied, they must resubmit an application for the following year no later than the deadline. While DEPSA would like to give priority to those applicants who have had their names on the Waiting List for the previous year, the laws governing public school academies prohibit DEPSA from doing so.
9. It is the parent's responsibility to inform the school's Registrar on any changes to their child's application.
10. **In order for a student's name to be changed from what appears on their birth certificate, proper documentation from the court must be submitted.**
11. Any Parent or Guardian who wishes to contest or appeal any aspect of the lottery selection process, may do so in writing to the Board of Directors, Detroit Edison Public School Academy, 1903 Wilkins, Detroit, Michigan 48207.



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**2022-2023 KINDERGARTEN APPLICATION**

Applicants applying for Kindergarten, must be age 5 by September 1 of the year in which they are applying.

**Print or Type**

**-Student/Parent Information-**

Student Last Name \_\_\_\_\_ Student First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Male  Female  Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Multi-Birth: Yes No If yes, which birth order \_\_\_\_\_

Race (Please check one)

African American Asian American Caucasian Hispanic/Mexican Native American Multi-Racial Other: \_\_\_\_\_

Ethnicity (Please check one) Hispanic Non-Hispanic

Student's Address \_\_\_\_\_ Apt. No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Student's Home Phone \_\_\_\_\_

District of Residency: Wayne Oakland Macomb Other \_\_\_\_\_

The student lives with: one parent two parents a qualified relative friend(s) an adult that is not the legal guardian alone with no adult

Parent/Guardian Last Name, First Name \_\_\_\_\_ Relation to Student \_\_\_\_\_

Parent/Guardian Address \_\_\_\_\_ Apt. No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent/Guardian Home Phone \_\_\_\_\_ Parent/Guardian Cell \_\_\_\_\_

Parent/Guardian Work Number \_\_\_\_\_ Parent/Guardian Email (required) \_\_\_\_\_

Parent/Guardian Last Name, First Name \_\_\_\_\_ Relation to Student \_\_\_\_\_

Parent/Guardian Address \_\_\_\_\_ Apt. No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent/Guardian Home Phone \_\_\_\_\_ Parent/Guardian Cell \_\_\_\_\_

Parent/Guardian Work Number \_\_\_\_\_ Parent/Guardian Email (required) \_\_\_\_\_

Pre-school Currently Attending: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Did your child participate in a Head Start Program? Yes No

List any Preschool, Day Care or Head Start Program your child attended: \_\_\_\_\_

Did your child receive: GSRP (Formerly known as MSRP) Head Start Funding? Yes No

Name of the School the child received GSRP: \_\_\_\_\_

**Answer all questions, attach required student records.**

Does your student have a past or current IEP? Please attach. (ex. – speech, resource room)  Yes  No

Does your student receive Special Education Services?  Yes  No

Does the applicant have a 504 Accommodation Plan? Please Attach?  Yes  No

Will you need accommodations to successfully participate in the education process and/or program for which you are applying?

If yes, please attach report.  Yes  No

Is the student receiving ESL services?  Yes  No If yes, please state reason \_\_\_\_\_

CIVIL RIGHTS INFORMATION FOR NEW STUDENTS IS REQUIRED FOR COMPLIANCE WITH FEDERAL CIVIL RIGHTS MANDATES.

**Please check  one - Disability Code**

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> 00- Not disabled | <input type="checkbox"/> D- Emotionally Disabled  | <input type="checkbox"/> H – Multiply Disabled       | <input type="checkbox"/> L – Traumatic Brain Injury |
| <input type="checkbox"/> A – Autistic     | <input type="checkbox"/> E- Hard of Hearing       | <input type="checkbox"/> I – Orthopedically Impaired | <input type="checkbox"/> M – Visually Impaired      |
| <input type="checkbox"/> B- Deaf          | <input type="checkbox"/> F – Learning Disabled    | <input type="checkbox"/> J – Other Health Impaired   |   |
| <input type="checkbox"/> C – Deaf-Blind   | <input type="checkbox"/> G – Cognitively Impaired | <input type="checkbox"/> K – Speech Impaired         |   |



**Answer all questions, attach required student records.**

Is the student's native tongue a language other than English?  Yes  No What is the language? \_\_\_\_\_  
Is the primary language used in the student's home or environment a language other than English?  Yes  No  
What is the language? \_\_\_\_\_  
Does the student receive bilingual education services?  Yes  No  
Is your child considered a migrant? Yes  No   
Has your child ever been identified as migrant? Yes  No  If yes, please list at what school: \_\_\_\_\_  
Does the applicant live with a foster parent? Yes  No   
Does the applicant have a parent that is active in the military Yes  No  If yes, please list: \_\_\_\_\_  
Does the student have any allergies?  Yes  No If yes, please list \_\_\_\_\_  
Is the **applicant** currently eligible for **free**  **or reduced lunch?**   Yes  No  
Do you and your student live in a fixed, regular, adequate nighttime residence?  Yes  No  
Do you and the student live in:  shelter  motel/hotel  temporarily with another family in a house, mobile home, or apartment  in a car or RV  
 at a campsite  transitional housing  other location: \_\_\_\_\_

Are any siblings currently attending the Detroit Edison Public School Academy (Note: DEPSA defines siblings as a brother or sister living within the same household)?

(Please check one)  Yes  No If yes, please list names and current grades below.

Name \_\_\_\_\_ Grade \_\_\_\_\_ Name \_\_\_\_\_ Grade \_\_\_\_\_  
Name \_\_\_\_\_ Grade \_\_\_\_\_ Name \_\_\_\_\_ Grade \_\_\_\_\_

Are any siblings applying for admissions as NEW applicants to the Detroit Edison Public School Academy for the 2021-2022 school year? (Please check one)  Yes  No

If yes, please list names and grades.

Name \_\_\_\_\_ Grade \_\_\_\_\_ Name \_\_\_\_\_ Grade \_\_\_\_\_  
Name \_\_\_\_\_ Grade \_\_\_\_\_ Name \_\_\_\_\_ Grade \_\_\_\_\_

Has the student ever been suspended/expelled from school or does the student have any discipline records?  Yes  No

If yes, please state reason \_\_\_\_\_

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

The Detroit Edison Public School Academy is a tuition free public school academy open to Michigan's children. With no admissions test, the Detroit Edison Public School Academy will serve students in grades Pre-Kindergarten through Grade 12<sup>th</sup> Grade that is representative of Michigan's diversity.

The Board of Directors of the Detroit Edison Public School Academy does not discriminate in its student admission procedures or course offerings provided to any student on the basis of race, sex, color creed, national origin, religion or handicapping condition as required by 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, Title II of the Americans with Disabilities Act of 1990, and the individuals with Disabilities Education Act (IDEA 1997).

**FOR OFFICE USE ONLY**

Walk-In  Faxed  Postmark \_\_\_\_\_ Date Received: \_\_\_\_\_ Time: \_\_\_\_\_  
 Registration Fee Paid Received By: \_\_\_\_\_  
 Complete  Incomplete

**Missing Information:**

- Birth Certificate  Immunization Record  Parent Identification  Health Appraisal  Current Report Card
- Home Language Survey & Student Discipline Record Form  District Waiver and Release Form
- Development History Checklist  Psychological Report/IEP Speech Report/MET Report/Exit IEP (2copies) only if applicable



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Enrollment & Pupil Services Office ~ (313) 833-1100 ext. 1211

**Form for Student Discipline Record**

PRINT Child's Name Last, First

Child's Birthdate

Grade in the Fall

**STUDENT DISCIPLINE RECORD**

*History of any student behavior that resulted in being removed from prior school districts must be reported when applying for enrollment. Public Act 211 prohibits students from possessing any weapons at school, at any school activity, or on the way to or from school on a school bus.*

Has your child ever been removed from a school for any violations of policies or rules about violent or unmanageable behavior, possession or use of a firearm, dangerous weapon or dangerous device?

If yes, how many times: \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

If no, please sign below.

My signature below affirms that my child has not been suspended or expelled from his/her last school for any violations of policies or rules about violent or unmanageable behavior, possession or use of a firearm, dangerous weapons, or dangerous device.

Print Name of Parent/Guardian

**Please complete one form per child.**

Signature of Parent/Guardian

Date

Address

(\_\_\_\_) \_\_\_\_\_

Phone

