

**LEVERETT ELEMENTARY SCHOOL**  
**School Choice Application**  
**FOR SCHOOL YEAR 2024-2025**

Student Name:

Date of Birth:

\_\_\_\_\_

Last	First	Middle	Month/Day/Year
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Physical Address: \_\_\_\_\_

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

Parent/Guardian Name(s): \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

Email: \_\_\_\_\_

Last School Attended:

\_\_\_\_\_

School Name	City or Town/State
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Grade student will be entering: \_\_\_\_\_

Please list any siblings currently enrolled in Leverett Elementary School:

\_\_\_\_\_

Please check yes \_\_\_ or no \_\_\_ if you would like your name given to other residents of your town for carpooling purposes.

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Date

**APPLICATIONS DUE MAY 31, 2024\***

\*Selection lottery will occur in June.

*The Leverett Elementary School is committed to ensuring that no student is denied access to any educational program or other activity of the Leverett Elementary School for reason of race, color, gender, gender identity, age, creed, homelessness, religion, national origin, sexual orientation, disability and pregnancy or pregnancy related conditions.*