



WARE PUBLIC SCHOOLS

Office of Superintendent
Mary-Elizabeth Beach, Ed.D.

239 West Street, P.O. Box 240
Ware, MA. 01082-0240

Tel. 413-967-4271
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SCHOOL CHOICE APPLICATION FORM (_____ SCHOOL YEAR)

This application is made and accepted under Massachusetts General Law, Chapter 76, Section 12B as amended by Chapter 71 of the Acts of 1993 (i.e. Education Reform Law), Section 61 and Ware School Committee guidelines as voted on March 11,2003. **The Ware Public School District does not provide transportation.

Date: _____

Student name: _____ D O B: _____
Last First Middle Initial

Residential Address: _____
Number Street
Town Zip Code

Mailing Address: (if different from above) _____

Telephone: _____ Grade Level Requested _____

Current School _____

Parent / Guardian Name: _____
Last First Middle Initial

Signature of Parent / Guardian: _____

For Ware Public Schools use only:

Date Received _____

Superintendent's Signature