

The School Choice Program for Certain Students with Exceptionalities (SCP) empowers families of students with certain exceptionalities with the financial resources to choose the school that will best address their students' needs. The Louisiana Department of Education will conduct a lottery to award student participation, with a priority given to continuing students. Please visit <http://www.louisianabelieves.com/> for more information.

INSTRUCTIONS

Please follow these instructions to complete and submit your student's application to participate in the School Choice Program for Certain Students with Exceptionalities for the upcoming school year:

1. Review Section I – Student Eligibility Requirements to verify your child's eligibility.
2. Complete Sections II-IV.
3. **Only students applying to participate in the School Choice Program for the first time:** Attach required documentation identified in Sections V-VI.
4. Complete Section VII.
5. Turn this application and required documentation into the school you are applying to by **March 17th, 2017**.

SECTION I: STUDENT ELIGIBILITY REQUIREMENTS

Any student who meets all of the following criteria is an eligible student:

1. The student has been evaluated by a **Louisiana public school** and determined to have any one of the following exceptionalities:
 - Autism
 - Mental Disability
 - Specific Learning Disability
 - Developmental Delay
 - Other Health Impairment
 - Traumatic Brain Injury
 - Emotional Disturbance
2. The student has an Individual Education Plan, district provided services plan or a nonpublic school created services plan; and,
3. The student is eligible to attend any Louisiana public school, grades Kindergarten through 12th grade.

SECTION II: STUDENT INFORMATION

1. Student's Social Security Number	2. Student's Last Name	3. First Name	4. Middle Initial	5. Suffix
6. Date of Birth (MM/DD/YYYY)	7. Sex (Check one) <input type="radio"/> M <input type="radio"/> F	8. Ethnicity – Is the student Hispanic? (for reporting only) <input type="radio"/> Y <input type="radio"/> N		
9. Race (For reporting only) Check all that apply: <input type="radio"/> American Indian <input type="radio"/> Asian <input type="radio"/> Black <input type="radio"/> Pacific Islander <input type="radio"/> White <input type="radio"/> Other				
10. Street Address	11. Apartment No.	12. City		
13. Zip Code	14. School District			
15. Did this student participate in the School Choice Program during the current school year? <input type="radio"/> Y <input type="radio"/> N	16. Please indicate the student's primary exceptionality: <input type="radio"/> Autism <input type="radio"/> Mental Disability <input type="radio"/> Emotional Disturbance <input type="radio"/> Developmental Delay <input type="radio"/> Other Health Impairment <input type="radio"/> Specific Learning Disability <input type="radio"/> Traumatic Brain Injury			

SECTION III: PARENT/LEGAL GUARDIAN INFORMATION

17. Last Name	18. First Name	19. Middle Initial	20. Suffix	21. Relationship to Student
22. Mailing Address (only if different from above)				
23. Home Phone (Area Code/No.)		24. Alternate Phone (Area Code/No.)		

SECTION IV: SCHOOL INFORMATION

25. Selected School for the Upcoming School Year (See list Below)	26. Selected School's Site Code for the Upcoming School Year (See List Below)
27. Projected Grade Level for the upcoming School Year (K-12)	28. Current School

2017 – 18 Participating Schools

Parish	School	Site Code	Grades Available in School Choice Program	Contact Phone #
Calcasieu	Immaculate Conception Cathedral School	505002	K, 3 rd – 6 th , 8 th	337.433.3497
Calcasieu	St. Theodore Holy Family Catholic School	505011	K – 5 th , 7 th – 8 th	337.855.9465
Calcasieu	St. Louis Catholic High School	505009	9 th , 12 th	337.436.7275
Caddo	McKinney – Byrd Academy	6A7001	K – 5 th	318.532.9849
East Baton Rouge	Angles Academy	674001	K – 11 th	225.924.9770
East Baton Rouge	Greater Baton Rouge Hope Academy	705001	K – 12 th	225.293.0141
East Baton Rouge	Our Lady of Mercy	502009	K – 8 th	225.924.1054
East Baton Rouge	St. Louis King of France	502031	K – 8 th	225.273.3932
East Baton Rouge	St. Michael the Archangel High School	502036	9 th – 12 th	225.753.9782
East Baton Rouge	Redemptorist Elementary School	502021	K – 8 th	225.355.1437
East Baton Rouge	The Dunham School	692003	K – 12 th	225.767.7097
East Baton Rouge	The Emerge Center	5B5001	K	225.343.4232
East Baton Rouge	Catholic Diocese Dept. for Special Education	502048	K – 12 th	225.336.8735
East Baton Rouge	St. Lillian Academy	9B3001	1 st – 7 th	225.771.8173
Jefferson	Archbishop Rummel Jr. High School	506127	8 th – 9 th	504.834.5592
Jefferson	Archbishop Rummel Sr. High School	506005	10 th – 12 th	504.834.5592
Jefferson	Ecole Classique	560001	K – 12 th	504.887.3507
Jefferson	St. Christopher School	506067	1 st – 7 th	504.837.6871
Orleans	Holy Rosary Academy	506014	K – 8 th	504.482.7173
Orleans	Holy Rosary High School	506161	9 th – 12 th	504.482.7173
Orleans	Raphael Academy	711001	6 th – 7 th , 10 th – 12 th	504.524.5955
Orleans	St. Michael Special School	506099	K – 12 th	504.524.7285
Orleans	Kidz View Learning Academy	519001	K – 2 nd	504.777.2812
Orleans	St. George's Episcopal School	625001	K – 8 th	504.891.5509
St. Tammany	Our Lady of the Lake School	506034	K – 2 nd , 4 th – 7 th	985.626.5678
St. Tammany	St. Paul's School	506101	8 th – 11 th	985.892.3200
St. Tammany	St. Peter School	506103	K – 7 th	985.892.1831

A list of special education services offered at participating schools can be found in the [School Choice Program FAQ](#).

SECTION V: SUPPORTING DOCUMENTATION – SPECIAL EDUCATION PLAN (NEW STUDENTS ONLY)

Please attach a copy of the student’s Individual Education Plan, district provided services plan or nonpublic school created services plan to this application. A nonpublic school created services plan must include:

- 1) The student’s exceptionality; 2) The services provided by the school; 3) Indication of how those services address the student’s exceptionality and needs; 4) Indication that the plan will be active for the upcoming school year; and 5) the Parent/Legal Guardian’s signature.

SECTION VI: SUPPORTING DOCUMENTATION – PROOF OF RESIDENCY (NEW STUDENTS ONLY)

Proof of Residency: Please attach a copy of a proof of residency with this application. All proofs of residency must be current (with an effective date of January 1st of the current year or later) and should match with the student’s address listed in this application. The person named on this proof of residency must be the parent or responsible adult of the student.

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| • Dated Rental lease agreement/mortgage agreement | • Telephone bill | • Sewage/water bill |
| • Current Official letter from a Government Agency (DSS, DHH) | • Cable or internet service bill | • Electricity/Gas bill |
| • Property tax notice for the previous calendar year | | |

SECTION VII: AGREEMENT/SIGNATURE

By submitting this application to the Louisiana Department of Education, you are granting permission for the Louisiana Department of Education to utilize, and to disclose to third parties, any information provided by you in this application to verify eligibility for the program and if a scholarship is awarded, to continue to utilize, and to disclose to third parties, this information as it relates to the award granted.

I, the parent/legal guardian, certify and verify that all of the foregoing information contained herein is true and correct.

Parent/Legal Guardian Signature

Date