

# White Cloud Return to School Application

555 Wilcox Ave, PO Box 1000, White Cloud, MI, 49349

Phone (231)689-1705 ext. 3306 Fax: (231)689-3349

I, \_\_\_\_\_, would like to apply for a transfer from the White Cloud Virtual School and return to in-person coursework through White Cloud Public Schools. By filling out this application, I am committing to White Cloud Public Schools and all guidelines that apply to in-person courses provided by the district. If approved, I understand that I will be locked into a minimum of 1 semester of in-person courses. I understand my application is eligible for review and will be considered once the following information has been completed:

Request Rationale (Completed by Transfer Student)

**Request Rationale:** Please explain why you are requesting this transfer. Use back of form if necessary.

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Office Use Only

Coursework Audit (Completed by School Counselor)

Eligible

Ineligible

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Mrs. Ruthven (High School)

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Ms. Bedell (Junior High)

Building Administration Recommendation (Completed by Principal)

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Mr. Foondle (Principal)

When all information is complete, this application will be eligible for review. Once a decision has been made, WCPS will contact the applicant, informing them of their academic status and what their next steps will be.