

## **MOUNT CLEMENS COMMUNITY SCHOOLS**

 167 Cass Avenue • Mount Clemens, Michigan 48043
 (586) 469-6100 • Fax (586) 469-5569

 MONIQUE BEELS, SUPERINTENDENT

## **Required Enrollment Documents:**

□ Birth Certificate

Must be original, and Parent Driver's License or Valid State Photo ID

- □ **Current** Immunization Record or Current Immunization Waiver
- □ **2 Current** Proofs of Residency:

Current lease agreement, current mortgage statement, current utility bill, current property/tax statements (these must include parent name, address and date)

□ Last Report Card

## **Other Legal Documents:**

 Custody, guardianship or foster care paperwork, All must have current dates and signatures.

\*Immunizations are available through your family doctor or the Macomb County Health Department at a cost

\*\* Free Vision and Hearing Screenings are available for children ages 3-18 at the Macomb County Health Department <u>http://www.macombcountymi.gov/publichealth</u> or (586)412-5945