

AIG Program Plans 2017-2018

AIG Student: _____

Current School: _____

Current Grade: _____

***Home School District for Middle School** _____

_____ **It is my intent for my child to attend the Magnet Program at Spring Hill Middle School.**

_____ **It is my intent for my child to attend his/her home school and to participate in AIG services offered there.**

Parent Signature: _____

Date: _____

****This information is needed regardless of your intent. Thank you**

Please return this form to the AIG teacher at your child's school by April 7, 2017