



THE  
LAKE AND PENINSULA  
SCHOOL DISTRICT

101 Jensen Drive  
P.O. Box 498  
King Salmon, Alaska 99613  
Phone (907) 246-4280 / Fax (907)  
246-4473



INTENT TO ENROLL  
2018-2019

I, Tanya Garner (First and Last Name), intend to enroll my children in the

Chignik Lake School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Chignik Lake and ready to attend school next fall. I understand that the school board will be using this information to make decisions on the school's status for the coming year.

The children that my family will enroll at the Chignik Lake School will be:

	Name	Age	Grade
1.	David Garner	17	11
2.	Raemie Garner	12	07
3.			
4.			
5.			
6.			

Tanya Garner  
(Signature)

03.05.2018  
(Date)

Verification Contact Information:

Primary Phone # 907-845-4029 Secondary Phone # 907-845-2212



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**INTENT TO ENROLL  
2018-2019**

I, JASON EISENBERG, intend to enroll my children in the  
(First and Last Name)

Chignik Lake School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Chignik Lake and ready to attend school next fall. I understand that the school board will be using this information to make decisions on the school's status for the coming year.

The children that my family will enroll at the Chignik Lake School will be:

	Name	Age	Grade
1	Jacemiah Eisenberg	12	8
2	Oxanna <del>Besand</del> Bereskin		4
3	Joseph Bereskin III	7	2
4			
5			
6			

[Signature]  
(Signature)

3/6/18  
(Date)

**Verification Contact Information:**

Primary Phone # 907 444 6791 Secondary Phone # 907 845 4144



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INTENT TO ENROLL  
2018-2019

I, Fred Shangin, intend to enroll my children in the  
(First and Last Name)

Chignik Lake School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Chignik Lake and ready to attend school next fall. I understand that the school board will be using this information to make decisions on the school's status for the coming year.

The children that my family will enroll at the Chignik Lake School will be:

Name	Age	Grade
1. <u>Dylan Shangin</u>	<u>14</u>	<u>9</u>
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

[Signature]  
(Signature)

3-7-18  
(Date)

**Verification Contact Information:**

Primary Phone # 845 4061 Secondary Phone # 845-4062



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**INTENT TO ENROLL  
 2018-2019**

I, Shalene O'Domin, intend to enroll my children in the  
(First and Last Name)

Chignik Lake School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Chignik Lake and ready to attend school next fall. I understand that the school board will be using this information to make decisions on the school's status for the coming year.

The children that my family will enroll at the Chignik Lake School will be:

Name	Age	Grade
1. Courtney Boskofsky	8	3
2. Allison Boskofsky	6	1
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Shalene O'Domin  
(Signature)

3/9/18  
(Date)

**Verification Contact Information:**

Primary Phone # 444-6436 Secondary Phone # \_\_\_\_\_



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**INTENT TO ENROLL  
2018-2019**

I, Rebecca Shangin, intend to enroll my children in the  
(First and Last Name)

Chignik Lake School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Chignik Lake and ready to attend school next fall. I understand that the school board will be using this information to make decisions on the school's status for the coming year.

The children that my family will enroll at the Chignik Lake School will be:

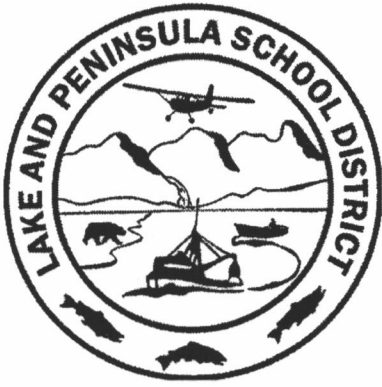
	Name	Age	Grade
1.	Taneisha Shangin	15	10
2.	Kyana Shangin	14	9
3.	Kierra Shangin	7	2
4.			
5.			
6.			

Rebecca Shangin  
(Signature)

3/12/18  
(Date)

**Verification Contact Information:**

Primary Phone # 845-4148 Secondary Phone # 853-4236



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**INTENT TO ENROLL  
2018-2019**

I, Margrette Kosbnyk (First and Last Name), intend to enroll my children in the

Chignik Lake School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Chignik Lake and ready to attend school next fall. I understand that the school board will be using this information to make decisions on the school's status for the coming year.

The children that my family will enroll at the Chignik Lake School will be:

Name	Age	Grade
1. <u>Landon O'Domin</u>	<u>5</u>	<u>Kindergarten</u>
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Margrette Kosbnyk  
(Signature)

3-12-18  
(Date)

**Verification Contact Information:**

Primary Phone # \_\_\_\_\_ Secondary Phone # \_\_\_\_\_