



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, Michelle Abyo, intend to enroll my children in the  
(First and Last Name)

Pilot Point School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Pilot Point 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 Pilot Point School will be:

	Name	Age	Grade
1	Loren	12	5
2	Kobe	14	8
3	Alan	16	10
4			
5			
6			

Michelle Abyo  
(Signature)

3/20/18  
(Date)

Verification Contact Information:

Primary Phone # 797-4174 Secondary Phone # 797-2297



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**INTENT TO ENROLL  
2018-2019**

I, Byron Wise Sr, intend to enroll my children in the  
(First and Last Name)

Pilot Point School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Pilot Point 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 Pilot Point School will be:

	Name	Age	Grade
1	Dylan Wise	13	7 <sup>th</sup>
2	Alyssa Wise	12	6 <sup>th</sup>
3	Byron Wise Jr	5	K
4			
5			
6			

Byron Wise Sr  
(Signature)

3-20-18  
(Date)

**Verification Contact Information:**

Primary Phone # 797-4014 Secondary Phone # \_\_\_\_\_



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**INTENT TO ENROLL  
 2018-2019**

I, Lori Ann Abyo, intend to enroll my children in the  
(First and Last Name)

Pilot Point School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Pilot Point 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 Pilot Point School will be:

Name	Age	Grade
1. <u>Isaac AbyoPhillips</u>	<u>6</u>	<u>1</u>
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____

Lori Ann Abyo  
(Signature)

March 15, 18  
(Date)

**Verification Contact Information:**

Primary Phone # 907-717-5213 Secondary Phone # \_\_\_\_\_



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246-4473



**INTENT TO ENROLL  
2018-2019**

I, Monica Brown, intend to enroll my children in the  
(First and Last Name)

Pilot Point School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Pilot Point 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 Pilot Point School will be:

	Name	Age	Grade
1	Alohi Anderson	10	5th
2	Nipayapon Anderson	8	3rd
3			
4			
5			
6			

Monica Brown  
(Signature)

3/15/18  
(Date)

**Verification Contact Information:**

Primary Phone # 907-799-4017 Secondary Phone # \_\_\_\_\_

Holm Family



THE LAKE AND PENINSULA SCHOOL DISTRICT  
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INTENT TO ENROLL  
2018-2019

I, Tabitha Holm, intend to enroll my children in the  
(First and Last Name)

Pilot Point School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Pilot Point 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 Pilot Point School will be:

	Name	Age	Grade
1.	Michael Holm	8	4 <sup>th</sup>
2.			
3.			
4.			
5.			
6.			

Tabitha Holm  
(Signature)

3-6-2018  
(Date)

Verification Contact Information:

Primary Phone # 907-521-7992 Secondary Phone # 797-2212  
(work)



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**INTENT TO ENROLL  
2018-2019**

I, Breanna Gnechen, intend to enroll my children in the  
(First and Last Name)

Pilot Point School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Pilot Point 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 Pilot Point School will be:

	Name	Age	Grade
1.	Adin Gnechen	13	7
2.	Charolette Kalmaroff	9	4
3.	Lexi Kalmaroff	3	Pre K
4.			
5.			
6.			

[Signature]  
(Signature)

3/20/18  
(Date)

**Verification Contact Information:**

Primary Phone # 797 4215 Secondary Phone # 797 4111



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**INTENT TO ENROLL  
2018-2019**

I, Beverly Matson, intend to enroll my children in the  
(First and Last Name)

Pilot Point School for the 2018-2019 school year. I assure the LPSD School Board that my child/children will, without a doubt, be in Pilot Point 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 Pilot Point School will be:

	Name	Age	Grade
1.	Hailey	6	1
2.			
3.			
4.			
5.			
6.			

Beverly Matson  
(Signature)

3-20-18  
(Date)

**Verification Contact Information:**

Primary Phone # 907-797-2260 Secondary Phone # \_\_\_\_\_