



2022-2023 Student Enrollment

STUDENT INFORMATION

Last Name:		First Name:		Middle Name:	
Preferred Name:		Student Cell:			
Primary Address:		City:	State:	Zip:	
Is address Temporary? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is student under 18 & living apart from parent/guardian? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are parents divorced or separated? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are there any custody issues? <input type="checkbox"/> Yes (Provide court documents to the school) <input type="checkbox"/> No			
Date of Birth:	Current Age:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	Place of Birth:		
Language Student First Learned:		Primary Language used in Home:			
Language Most often Spoken by Student:		Preferred Language for Messages/Mailings sent Home:			
Current School:			Current Grade:		
Requested Enrollment (Start) Date at Pointe Schools:			Enrollment Grade:		
Has the student been expelled or is the student in the process of being expelled? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure					

PARENT/GUARDIAN INFORMATION

Enrolling Parent Last Name:		Enrolling Parent First Name:			
Lives With: <input type="checkbox"/> Yes <input type="checkbox"/> No		Legal Custody: <input type="checkbox"/> Yes <input type="checkbox"/> No		Gender: <input type="checkbox"/> M <input type="checkbox"/> F	
Relationship (Check one): <input type="checkbox"/> Parent <input type="checkbox"/> Stepparent <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other:					
Primary Address:		City:	State:	Zip:	
Email:			Cell:		
Employer:			Work:		

Parent Last Name:		Parent First Name:			
Lives With: <input type="checkbox"/> Yes <input type="checkbox"/> No		Legal Custody: <input type="checkbox"/> Yes <input type="checkbox"/> No		Gender: <input type="checkbox"/> M <input type="checkbox"/> F	
Relationship (Check one): <input type="checkbox"/> Parent <input type="checkbox"/> Stepparent <input type="checkbox"/> Grandparent <input type="checkbox"/> Foster Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other:					
Primary Address:		City:	State:	Zip:	
Email:			Cell:		
Employer:			Work:		



POINTE SCHOOLS SIBLING INFORMATION

Siblings at a Pointe School: <input type="checkbox"/> Yes/Current <input type="checkbox"/> Yes/Registered <input type="checkbox"/> Prior/Graduated <input type="checkbox"/> No					
Name:	Grade:	School:	<input type="checkbox"/> NP	<input type="checkbox"/> CP	<input type="checkbox"/> PP
Name:	Grade:	School:	<input type="checkbox"/> NP	<input type="checkbox"/> CP	<input type="checkbox"/> PP
Name:	Grade:	School:	<input type="checkbox"/> NP	<input type="checkbox"/> CP	<input type="checkbox"/> PP
Name:	Grade:	School:	<input type="checkbox"/> NP	<input type="checkbox"/> CP	<input type="checkbox"/> PP

MILITARY CONNECTED STUDENT

- Student is a dependent of a member of the United States military service in the Active Duty Army, Navy, Air Force, Marine Corps, or Coast Guard.
- Student is a dependent of a fulltime member of the National Guard, or Reserve force of the United States military (Army, Navy, Marine Corps or Air Force).
- Student is a dependent of a member of the National Guard, or Reserve force of the United States military (Army, Navy, Marine Corps or Air Force)
- None of the above

STUDENT EDUCATIONAL INFORMATION

List previous school(s)

School:		Telephone:		Fax:	
Address:				Dates Attended:	
City:		State:	Zip Code:	Grades Attended:	
School:		Telephone:		Fax:	
Address:				Dates Attended:	
City:		State:	Zip Code:	Grades Attended:	
School:		Telephone:		Fax:	
Address:				Dates Attended:	
City:		State:	Zip Code:	Grades Attended:	
School:		Telephone:		Fax:	
Address:				Dates Attended:	
City:		State:	Zip Code:	Grades Attended:	
School:		Telephone:		Fax:	
Address:				Dates Attended:	
City:		State:	Zip Code:	Grades Attended:	



Has the student been expelled from their most recent school?

Yes No

If yes, please provide details below:

ENROLLMENT CERTIFICATION

I certify that the information I have provided Pointe Schools is true and complete. I understand completion of this form and providing proof of residency is required for enrollment. I understand all other documents (including proof of age, English Language Survey, immunization records, etc.) must be provided, as required by law and school policy, prior to my child attending classes.

I certify that I have read and agree to abide by the current Student Handbook and I agree to support and abide by each current Student Handbook as long as my child is enrolled at Pointe Schools.

I understand it is my responsibility to notify the school in writing of any updates and/or changes.

Student Signature

Date

Parent/Guardian Signature

Date

Pointe Schools is a non-profit, publicly funded independent public school and does not discriminate based on gender, race, religion, national or ethnic origin, color, or disability.



STUDENT PROFILE*

*** This information is not required for enrollment or to complete a student file. It helps us understand your child and their interests and provides valuable information we use for programmatic decision-making.**

Student's Strengths:

Student's Interests/Hobbies:

Student's Favorite Academic Subjects:

Student's Anticipated Extracurricular Involvement:

Student's Reason for Choosing to attend Pointe Schools:

How did you hear about us?

The following forms are to be filled out prior to attendance in Pointe Schools. They are not required prior to enrollment.
However, many parents like to complete all the forms at one time prior to enrollment.



Arizona Department of Education Arizona Residency Documentation Form

Student _____ School _____

School District or Charter Holder: Pointe Schools

Parent/Legal Guardian _____

As the Parent/Legal Guardian of the Student, I attest* that I am a resident of the State of Arizona and submit in support of this attestation a copy of the following document that displays my name and residential address or physical description of the property where the student resides:

- ___ Valid Arizona driver's license, Arizona identification card or motor vehicle registration
- ___ Valid Arizona Address Confidentiality Program authorization card
- ___ Real estate deed or mortgage documents
- ___ Property tax bill
- ___ Residential lease or rental agreement
- ___ Water, electric, gas, cable, or phone bill
- ___ Bank or credit card statement
- ___ W-2 wage statement
- ___ Payroll stub
- ___ Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe in Arizona
- ___ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)
- ___ Temporary on-base billeting facility (for military families)

___ I am currently unable to provide any of the foregoing documents. Therefore, I have provided an original affidavit signed and notarized by an Arizona resident who attests that I have established residence in Arizona with the person signing the affidavit.

Signature of Parent/Legal Guardian

Date

*For members of the armed services, the provision of verifiable documentation does not serve as a declaration of official residency for income tax or other legal purposes. Armed service members may utilize a temporary on-base billeting facility as the address for proof of residency.



State of Arizona
Affidavit of Shared Residence

Student Name: _____

Parent/Legal Guardian Name: _____

School Name: _____

School District or Charter Holder: _____

Name of Arizona Resident: _____

I, (resident name) _____ swear or affirm that I am a resident of the State of Arizona and that the person listed below resides with me at my residence, described as follows:
residence address or physical description of my property:

Person who resides with me: _____

Location of my residence: _____

I submit in support of this attestation a copy of the following document that displays my name and current residence address or physical description of my property:

- ___ Valid Arizona driver's license, Arizona identification card or motor vehicle registration
- ___ Valid Arizona Address Confidentiality Program Authorization card
- ___ Real estate deed or mortgage documents
- ___ Property tax bill
- ___ Residential lease or rental agreement
- ___ Water, electric, gas, cable, or phone bill
- ___ Bank or credit card statement
- ___ W-2 wage statement
- ___ Payroll stub
- ___ Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe in Arizona.
- ___ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)

Printed Name of Affiant: _____

Signature of Affiant: _____

Acknowledgement

State of Arizona
County of _____

The foregoing was acknowledged before me this _____ day of _____, 20____,
By _____.

Notary Public

My Commission Expires:

2022-2023 SPECIAL EDUCATION/504 INFORMATION

Student's Last Name: _____ First Name: _____ Middle: _____

Pointe Schools values our community's diversity and is committed to providing a safe, welcoming environment for all students. The information on this form is **not** considered in making enrollment decisions. Pointe Schools is committed to providing all eligible students with services upon enrollment and this information is requested solely for purposes of ensuring continuity of services.

Please check whichever statement is correct for your child.

- My child is currently receiving Special Education Services.

If selected, current school: _____ Current Grade: _____

We will request the IEP from your child's most recent school. To help us complete your child's file more quickly, please attach a copy of your child's most recent IEP or Evaluation if you have it.

- My child previously received Special Education Services in _____ grade but does not now.

School that provided services: _____

- My child has a 504 because of the following disability: _____.

If selected, current school: _____ Current Grade: _____

We will request the 504 from your child's most recent school. To help us complete your child's file more quickly, please attach a copy of the most recent 504 if you have it.

- My child does not receive Special Education services and does not have a 504.

I understand that Pointe Schools must have access to my child's special education records, including evaluations, Multidisciplinary Evaluation Team (MET) records, Individualized Education Plans (IEPs), and other records in order to provide my child with a Free and Appropriate Education (FAPE).

Parent/Guardian Signature

Date



Arizona Department of Education

Office of English Language Acquisition Services

Home Language Survey

The responses to this Home Language Survey (HLS) are used by the school to provide the most appropriate instructional programs and services for the student. **The answers below will determine if a student will take the Arizona English Language Learner Assessment (AZELLA).** Please respond to each of the three questions as accurately as possible. If you need to correct any of your responses, this must be done **before** the student takes the AZELLA Placement Test.

1. What language do people speak in the home *most* of the time?

2. What language does the student speak *most* of the time?

3. What language did the student first speak or understand?

Student Name _____ District Student ID _____

Date of Birth _____ SSID _____

Parent/Guardian Signature _____ Date _____

District or Charter Pointe Educational Services dba Pointe Schools

School _____

Please provide a copy of the Home Language Survey to the EL Coordinator/Main Contact on site. In AzEDS, please enter all three HLS responses.

These HLS questions are in compliance with Arizona Administrative Code (R7-2-306(B)(1),(2)(a-c). (Revised 01-2020)



Arizona Department of Education

Office of English Language Acquisition Services

Encuesta sobre el Idioma en el Hogar

La escuela utiliza las respuestas a esta Encuesta del idioma del hogar (HLS) para proporcionar los programas y servicios educativos más apropiados para el estudiante. **Las respuestas que aparezcan a continuación determinarán si un estudiante tomará la Evaluación de aprendizajes del idioma inglés de Arizona (AZELLA).** Responda a cada una de las tres preguntas con la mayor precisión posible. Si necesita corregir alguna de sus respuestas, esto debe hacerse **antes** de que el estudiante tome el Examen AZELLA.

1. **¿Qué idioma hablan las personas en el hogar la mayoría del tiempo?**

2. **¿Qué idioma habla el estudiante la mayoría del tiempo?**

3. **¿Qué idioma habló o entendió el estudiante primero?**

Nombre del estudiante _____		Distrito	
Fecha de nacimiento _____		Núm. de identificación _____	
Firma del padre o tutor _____		SSID _____	
Distrito o Charter		Fecha _____	
Escuela _____		<u>Pointe Educational Services dba Pointe Schools</u>	

Please provide a copy of the Home Language Survey to the EL Coordinator/Main Contact on site. In AzEDS, please enter all three HLS responses.

Preguntas en conformidad con (R7-2-306(B)(1),(2)(a-c) del Código Administrativo de Arizona. (Revised 01-2020)

RACE and ETHNICITY DATA COLLECTION

In accordance with federal guidance, schools are required to utilize a two-part question to collect data about race and ethnicity. Part 1 is in regards to Ethnicity and Part 2 relates to race. More than one race may now be selected on Part 2.

Date: _____ Child's Name: _____

Parent/Guardian Signature: _____

Race/Ethnicity Two-Part Question: Answer BOTH questions.

Part 1: Ethnicity

Is the student Hispanic or Latino? (Choose only one)

- No, not Hispanic or Latino
- Yes, Hispanic or Latino (A person of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.)

Part 2: Race

What is the student's race? (Regardless of how respondent answered the first question, choose one or more)

- American Indian or Alaska Native (A person having origins in any of the original tribal peoples of North and South America, including Central America, and who maintains affiliation or community attachment.)
- Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)
- Black or African American (A person having origins in any of the black racial groups of Africa.)
- Native Hawaiian or Other Pacific islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
- White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)