

STUDENT ENROLLMENT FORM

Please use Blue/Black Ink Only

<b>Student's Legal Last Name</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Suffix</b>	<b>Grade</b>
<b>Date of Birth</b> ( <i>mm/dd/yyyy</i> )	<b>Gender (Select One):</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Student's Refugee (I-94) #</b> (if applicable)		
<b>Birth State</b>	<b>Birth Country</b>	If Birth Country is not US, provide Date Entered US School:		
<b>Student's Street Address</b> — ( <i>Include Bldg/Apt#</i> )		<b>City, State, Zip Code</b>		
<b>Student's Mailing Address PO Box, if different than above</b>		City, State, Zip Code		

**NOTE: This information is required by the U.S Department of Education.**  
**Ethnicity** (*check applicable box*)  Hispanic OR  Non-Hispanic

**Race** (*Check all that apply*)  Asian or Indian Subcontinent  Black/African American  
 White: European, North African, Middle East  Native Hawaiian/Other Pacific Islander  
 American Indian/Alaskan Native: Tribe(s) \_\_\_\_\_  
 CIB:  Yes  No JOM 305:  Yes  No Title VI 506:  Yes  No

**Please check any special services previously received:**  
 Special Education  504 Accommodation  Gifted/Talented  English Language Learner (ELL)

**LEGAL PARENT/GUARDIAN INFORMATION:**

**Please List Adults Responsible for Student and Relationship to Student as Indicated Here:**  
 Father, Mother, Step-Father, Step-Mother, Guardian, DCS, Foster Parent, or Self (*Emancipated, Married, In transition*).  
**Check appropriate boxes** (explanations are on reverse side). Add any additional parent/guardians on reverse side.

<b>Relation:</b>	<b>Parent/Guardian (Last Name, First Name)</b> Address, if Different from Above	<b>Phone Numbers</b> <input type="checkbox"/> Text Messages Allowed <b>Cell</b> <input type="checkbox"/> <b>Home</b> <input type="checkbox"/> <b>Work</b> <input type="checkbox"/>	<input type="checkbox"/> Lives With <input type="checkbox"/> Contact Allowed <input type="checkbox"/> Educational Rights <input type="checkbox"/> Has Custody <input type="checkbox"/> Mailing Allowed <input type="checkbox"/> Enrolling Parent <input type="checkbox"/> Release To <input type="checkbox"/> School Messenger
<b>Email:</b>	<b>Preferred language for communication (both written and verbal):</b> English <input type="checkbox"/> Spanish <input type="checkbox"/>		
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<b>Email:</b>	<b>Preferred language for communication (both written and verbal):</b> English <input type="checkbox"/> Spanish <input type="checkbox"/>		

All students will be provided a **phoenixunion.org** email address. It will be mandatory for students to use this email address to communicate with teachers, staff, and other students.

**EDUCATIONAL HISTORY:**

**Student's Previous School Information**  
 Has student previously attended any Phoenix Union High schools? Yes  No   
 If Yes: School Name \_\_\_\_\_ Grade: \_\_\_\_\_  
 If No: Last School Attended: \_\_\_\_\_ Date: \_\_\_\_\_  
 School Type:  High School  8<sup>th</sup> Grade \_\_\_\_\_  Other \_\_\_\_\_  
 State and/or Country located: \_\_\_\_\_

Is the above-named student:  
 • Suspended or expelled from any school or district?  Yes  No  
 • Being considered for disciplinary action, suspension or expulsion?  Yes  No

**MIGRANT WORKER:**

Migrant Worker  Yes  No

# PHOENIX UNION HIGH SCHOOL DISTRICT

School Year 2023-2024

## ADDITIONAL PARENT/GUARDIANS IF APPLICABLE:

<b>Relation:</b>	Parent/Guardian (Last Name, First Name) Address, if Different from Above	<b>Phone Numbers</b> <input type="checkbox"/> Text Messages Allowed <b>Cell</b> <input type="checkbox"/> <b>Home</b> <input type="checkbox"/> <b>Work</b> <input type="checkbox"/>	<input type="checkbox"/> Lives With <input type="checkbox"/> Contact Allowed <input type="checkbox"/> Educational Rights <input type="checkbox"/> Has Custody <input type="checkbox"/> Mailing Allowed <input type="checkbox"/> Enrolling Parent <input type="checkbox"/> Release To <input type="checkbox"/> School Messenger
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<b>Email</b>		Preferred language for communication: English <input type="checkbox"/> Spanish <input type="checkbox"/> (both written and verbal)	

## MCKINNEY VENTO STATUS (student in transition):

1. Is your current address a temporary living arrangement? Yes \_\_\_ No \_\_\_
2. If temporary, is this living arrangement due to loss of housing or economic hardship? Yes \_\_\_ No \_\_\_
3. If you answered yes to both questions, please provide your current living arrangement:
  - Doubled up with relatives or friends
  - In a shelter
  - In a motel/hotel
  - Moving from place to place
  - In a place not designed for traditional sleeping arrangements i.e., car, campground, park or other public place, etc.
4. How long have you been at the current address? \_\_\_\_\_
5. Other Children in the family:

NAME	SCHOOL	GRADE or AGE

If you answered **YES** to both questions 1 and 2, please complete the **McKinney-Vento Eligibility Questionnaire** to receive services.

## FOSTER CARE:

1. Are you currently placed in a DCS Group Home, with Kinship Foster, or with a Foster Guardian? Yes \_\_\_ No \_\_\_
2. If yes, please check the box that describes the foster placement:
  - DCS group home
  - Foster guardian
  - Kinship foster
  - Other
3. Are you enrolling in your school of origin? School of Origin  School of Residence
4. If we are the school of residence, has the student been withdrawn from the school of origin? Yes \_\_\_ No \_\_\_
5. Has a Best Interest Determination (BID) been completed to determine school selection? Yes \_\_\_ No \_\_\_
6. If yes, please provide a copy of the completed BID with the Best Interest School Selection documented.
7. For DCS Group Home foster placements, please list group home staff who are approved to pick up student(s) in the designated contact boxes of this form and/or on the Emergency Student Health Information Card.

If you answered **YES** to questions 1 and 2, please provide a copy of the current **Notice to Provider**.

**I hereby certify that I am the legal parent or guardian for this student and the information that I have provided is accurate and true.**

\_\_\_\_\_  
**PARENT / LEGAL GUARDIAN SIGNATURE**

\_\_\_\_\_  
**Date**

### Explanation for Parent/Guardian Checkboxes:

**Lives With:** Indicates the parent/guardian lives in the household with the student.

**Contact Allowed:** Indicates the parent/guardian is allowed contact with the student and will be included in school to student communications.

**Ed. Rights:** Indicates the parent/guardian has rights to make decisions regarding the student's education and access to student information system in the parent portal.

**Has Custody:** Indicates the parent/guardian has legal custody of the student. (At least one parent/guardian must have this box checked).

**Mailing Allowed:** Indicates the parent/guardian may receive mailings regarding the student (email included).

**Enrolling Parent:** Indicates the parent/guardian completing enrollment form.

**Release To:** Indicates the school may release the student to the parent/guardian.

**School Messenger:** Indicates the parent/guardian who should receive phone calls and text messages from Phoenix Union's messaging system.

### **FOR OFFICE USE ONLY**

PXU Home School	Previous AZ School	Elementary School	HLS Lang.	Staff Initials
PXU Student ID #	ADE/EdFi ID #	Orig Yr Grad	Enter Date & Enter Code	Date Entered in SIS
<b>Grade</b>	<b>BC</b> <input type="checkbox"/>	<b>Imm.</b> <input type="checkbox"/>	<b>HLS</b> <input type="checkbox"/>	<b>Residency Form &amp; Proof</b> <input type="checkbox"/>
				<b>Parent/Guardian ID</b> <input type="checkbox"/>