CAMBRIDGE ACADEMY EAST NEW STUDENT ENROLLMENT FORM 2021-2022 School Year

STUDENT INFORMATION			G	RADE LEVEL	
Child's Full Legal Name				Gender	
Birthdate	Place of Birth		Preferred Name		
NOTE: This information is required RACE: (check one or more regardless of eth					
PARENT/GUARDIAN INFORMA		1			
Father/Guardian Name:		Mother/Guardian	Mother/Guardian Name:		
Primary Phone- Wor	rk Phone-	Primary Phone-		Work Phone-	
o home o cell		o home o	cell		
Secondary Phone-	ail	Secondary Phone	-	Email	
o home o cell		o home o	cell		
Address		Address			
City/State/Zip		City/State/Zip	City/State/Zip		
Employer		Employer	Employer		
Please check all that apply: O Father O Stepfather O Lives with O Has legal custody O Legal Guardian			Please check all that apply: O Mother O Stepmother O Lives with O Has legal custody O Legal Guardian		
If there are issues regarding Custody/S Non-Custodial Parent Name/Do not R		itation, please note here and	attach all legal doc	umentation.	
EMERGENCY CONTACT				ach Parent/Guardian	
INFORMATION			d may be released t	o all listed here	
Contact's Full Name		Relationship	Phone		
Contact's Full Name		Relationship	Phone		
Contact's Full Name	l	Relationship	Phone		
HOSPITAL OF CHOICE			Phone		
Health and allergy alerts	_				
PREVIOUS SCHOOL INFORMATION		Last Grad	e Completed:		
Previous School Name/District: Last Day of Attendance:					
Is there any special educational, custon If yes, explain. What is the primary language used in the primary language used in the primary language.				es o No IEP? o Yes o No	
What is the language most often spok What is the language that the student	en by the student?	Title latiguage spoketi by the	Students		
Check the option that best describes the st		Identifier status at any point dur	ring the school year. If	a parent(s)/legal guardian's status	
changes, please notify your child's school c Guard) O Yes O No. Student is a depend	office. Student is a depend	ndent of a member of the Active I	Duty Forces (Army, Na	avy, Air Force, Marine Corps or Coast	
OR ONot Applicable Has this student ever been enrolled in	Cambridge Academy F	East before now? O Yes	O No		
I have read, understand and agree to abide by the policies contained in the 2021-2022 parent handbook.					
Parent/Guardian Signature	agree to ablac by		ate	2 parent nanabook.	
FOR OFFICE USE ONLY Star	rt Date	Birth Certificate In	nmunizations	Entered	

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I have read, understand and agree to abide by the Internet policy contained in the Cambridge Academy Handbook, which is located at www.cambridgeacademyaz.com.
Yes, as the parent or legal guardian, I grant permission for my son or daughter to access the Internet. I understand that individuals and families may be held liable for violations. I understand that some materials on the Internet may be objectionable, but I accept responsibility for guidance of Internet use by setting and conveying standards for my daughter or son to follow when selecting, sharing, or exploring information and media. Cambridge Academy East will not be held responsible for materials which my son/daughter might access.
No , as the parent or legal guardian, I do not want my son or daughter to access the Internet. I have explained to my child that they may not access the Internet.
Photo/Video/Media Release Form
Throughout the school year students attend programs, activities, field trips and events along with normal classroom routines that support their education, promote community service or encourage positive behavior.
With the Administrator's approval, occasionally, staff, parents and local media cover these events by taking photographs or video. This may include newspaper, television, websites or other media production. This also includes our school's website and classroom web pages.
By checking below, you agree that you have been notified of the possibility that your son/daughter may be included in photographs or video and authorize the use for public print, display or broadcast. You agree to participate in these projects without financial remuneration, and understand that this releases the school/photographer/interviewer from any future claims, as well as from any liability, arising from the use of said photograph/interview/video.
I give permission to have my child interviewed and photographed/videotaped by the news media.
I give permission to have my child photographed by the district. Photos may be used on district, school, teacher websites.
 I give permission to have the district/school feature my child's school work (e.g. art, essays, etc). ☐ First Name Only ☐ First and Last Name
I give permission to have my child videotaped by the district/school. Videos may be viewed by district staff or the public. Videos may also be used on district, school, teacher websites.
Please DO NOT include my child in these activities. I DO NOT want my child photographed or videotaped.
I have read, understand and agree to abide by the Cambridge Academy Handbook, which is located at www.cambridgeacademyaz.com. Any false statement or omission of information on enrollment documents, including falsely indicating priority eligibility, may result in revocation of enrollment offers.
Student Name
Parent/Guardian's name (please print)
Parent/Guardian's signature/date



Arizona Department of Education Arizona Residency Documentation Form

Student_	<u>:</u>	School	
School l	District or Charter Holder		
Parent/	/Legal Guardian		
support		st* that I am a resident of the State of Arizona and document that displays my name and residential alent resides:	
	Valid Arizona Address Confidentiality Pro- 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) Indian tribe in Arizona Documentation from a state, tribal or federal Administration, Veteran's Administration, A Temporary on-base billeting facility (for many of the state of the state of tribal enrollment (506 Form)	or other identification issued by a recognized ral government agency (Social Security Arizona Department of Economic Security) nilitary families) the foregoing documents. Therefore, I have proven an Arizona resident who attests that I have est	
Signatui	re 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 onbase billeting facility as the address for proof of residency.



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 <u>before</u> the student takes the AZELLA Placement Test.

2. What language does the stude	What language does the student speak <i>most</i> of the time?				
3. What language did the studen	nt first speak or understand?				
Student Name	District Student ID				
Date of Birth	SSID				
Parent/Guardian Signature	Date				

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)