



# ENROLLMENT FORM FOR SCHOOL YEAR 2015-2016

Phone: (623)933-3733 Fax: (623)252-0200



A Challenge Foundation Academy

## STUDENT INFORMATION

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_  
 MIDDLE INITIAL \_\_\_\_\_ GENDER M \_\_\_ F \_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_  
 BIRTH CITY \_\_\_\_\_ BIRTH STATE \_\_\_\_\_  
 HOME ADDRESS \_\_\_\_\_ APT# \_\_\_\_\_  
 CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_ GRADE ENTERING 2015-2016 \_\_\_\_\_

OFFICE USE ONLY	
Student ID:	_____ Grade _____
SAIS ID:	_____
Teacher:	_____
Date Received:	_____
Entry Date:	_____
Code:	_____
Enrollment Date:	_____
Initials:	_____
After School Program:	Y ___ N ___
IEP:	Y ___ N ___ 504 Plan: Y ___ N ___
ELL:	Y ___ N ___ Siblings: Y ___ N ___
Referred by:	_____

## PREVIOUS SCHOOL INFORMATION

NAME OF PREVIOUS SCHOOL ATTENDED \_\_\_\_\_ SCHOOL PHONE \_\_\_\_\_

**ETHNICITY:** Please check one: (We are required to provide yearly information to the Office of Civil Rights and state attendance records) Race/Ethnic

Background.  American Indian / Alaskan Native  Hispanic / Latino  White  Black or African American  
 Native Hawaiian or Other Pacific islander

## PRIMARY HOME LANGUAGE SURVEY:

1. What is the primary language used in the home regardless of the language spoken by the student? \_\_\_\_\_
2. What is the language most often spoken by the student? \_\_\_\_\_
3. What is the language that the student first acquired? \_\_\_\_\_

## LEGAL PARENT/GUARDIAN INFORMATION

PRIMARY PARENT / GUARDIAN CONTACT ( Last, First)		SECONDARY PARENT / GUARDIAN CONTACT( Last, First)	
HOME ADDRESS / APT#		HOME ADDRESS / APT#	
CITY / STATE / ZIP		CITY / STATE / ZIP	
HOME PHONE	CELL PHONE	HOME PHONE	CELL PHONE
WORK PHONE	RELATION TO STUDENT	WORK PHONE	RELATION TO STUDENT
EMAIL ADDRESS		EMAIL ADDRESS	

If parents are separated / divorced, who has legal custody? \_\_\_\_\_ a copy of the legal paperwork must be provided.

Does the non-custodial parent have restricted visitations rights? Yes \_\_\_ No \_\_\_ a copy of the legal paperwork must be provided.

I certify the above information is true and correct.

Parent/Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_

It is the role of Pioneer to provide a safe and secure learning environment for all its students without distinction based on race, religion, ethnicity, disability, gender, or sexual orientation. Discrimination, sexual and bias-motivated harassment, and violations of civil rights disrupt the educational process and will not be tolerated and will result in disciplinary action.