**Amphitheater Public Schools** - Student Registration Form

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| **School** |  |
| **School Year** |  | **Entering Grade Level for Given School Year** |  |

**Directions:** After completing this form, please save a copy on your computer. The Student Registration Form, along with any accompanying documentation, can be turned into the front office of the school you are enrolling your student.

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| **STUDENT INFORMATION (Please PRINT student name exactly as it appears on the birth certificate)** |
| **Legal Last Name** | **Legal First Name** | **Preferred First Name** | **Full Middle Name** | **Generation** **(Jr. III, IV, etc.)** | **Gender****[ ]  M** **[ ]  F** |
| **Ethnicity:**  | **[ ] Hispanic** **[ ] Non-Hispanic** | **Race: (Check all that apply)**  | **[ ]  Black / African American** **[ ]  White** **[ ]  Native Hawaiian / Pacific Islander** **[ ]  Asian** **[ ]  American Indian / Alaskan Native (Tribal Affiliation and Number** **)** |
| **Date of Birth (mm/dd/yyyy)** | **Country of Birth** | **State of Birth (US only)** | **Place of Birth (City)** |
| **Residential Address:** **Apt.#** **City** **ST** **Zip**  |
| **Preferred Mailing Address:       Apt.#       City       ST       Zip** |
| **For High School** | **Student****Email** | **@** | **Student** **Phone** | **(****)** **-**  |

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| **Enrollment History** | **Has this student ever attended school in Arizona before?** **[ ] Yes** **[ ] No****Has this student ever attended an Amphitheater school any time in the past?** **[ ] Yes** **[ ] No** |
| **Last school attended:** **[ ] Public** **[ ] Charter** **[ ] Private** **[ ] Homeschool**  |
| **Year**  | **Grade Level**  | **District**  | **City**  | **State**  |

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| **Special Programs, Accommodations or Services (Check all that apply past or present and provide paperwork.)** |
| **[ ]  Special Education** **[ ]  504** **[ ]  English Language Development** **[ ]  Chronic Illness** **[ ] Gifted/Accelerated (****[ ] Student was previously participated in accelerated classes/programs)** **[ ]  Other** **Note: Please submit all relevant documentation/records, including but not limited to 504 Plan, IEP, BIP, Chronic Illness, etc.** |

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| **Other Information (Check all that apply)** |
| **[ ]  Active Military Dependent** **[ ]  Foster** **[ ]  DCS** **[ ]  Refugee Status** **[ ]  McKinney-Vento/Homeless** **[ ]  Open Enrollment** |

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| **Other Children/Siblings Under 18 Living at this Address** |
| **Name (Last Name, First Name)** | **Date of Birth**  | **School** | **Grade** |
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| **Transportation (Students must meet eligibility guidelines as listed in Board Policy. Please see Amphitheater website.)** |
| **If riding bus, student will ride:** **[ ]  To AND From School** **[ ]  To School Only** **[ ] From School Only** **[ ] Day Care:** **Other modes of transportation:** **[ ]  Walk** **[ ]  Bike** **[ ]  Parent Drop Off / Pick Up** **[ ] Student drives (HS only)** |

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| **Office Use Only** |  **AM Bus#\_\_\_\_\_\_\_ Stop\_\_\_\_\_\_\_\_\_** **PM Bus#\_\_\_\_\_\_\_ Stop\_\_\_\_\_\_\_\_\_** | **Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_ Entry Code:\_\_\_\_\_\_ Start Date:\_\_\_\_\_\_\_\_\_\_\_****Data Entry Date:\_\_\_\_\_\_\_\_\_\_\_ Initials of Person Entering Data:\_\_\_\_\_\_\_\_\_\_** |

**Student Name:**       **Grade:**

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| **Parent/Guardian Contact #1 (Only contact #1 is the PRIMARY contact and will be contacted first)** |
| **[ ]  Mother** **[ ]  Father** **[ ]  Foster Mother** **[ ]  Foster Father** **[ ]  Step-Mother** **[ ]  Step-Father** **[ ]  Guardian** **[ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Last Name** | **First Name** | **Employer** |
| **Cell Phone (     )       -** | **Home Phone (     )       -** | **Work Phone (     )       -** |
| **[ ] Address same as the student** | **Address (if different than student):** **Apt.#** **City** **ST** **Zip**  |
| **Email:       @**  | **Contact #1 Spoken Language**  |
| **[ ]**  | **Agrees to be contacted electronically, including text messages, for educational items** **(e.g., emails from teachers and principals, progress reports, messages from schools, etc.)** |
| **[ ]**  | **I would like to receive a printed copy of Amphitheater Code of Conduct (Amphitheater Code of Conduct is accessible via the following link:** [**https://www.amphi.com/Domain/1053**](https://www.amphi.com/Domain/1053)**)** |
| **Check all that apply:**  | **[ ]  Can pick up student** **[ ]  Lives with student** **[ ]  Is an Emergency Contact**  |
| **[ ]  Receives Report Card** **[ ]  Can have Parent Portal Access**  |
| **Parent/Guardian Contact #2**  |
| **[ ]  Mother [ ]  Father [ ]  Foster Mother [ ]  Foster Father [ ]  Step-Mother [ ]  Step-Father [ ]  Guardian [ ]  Other:** |
| **Last Name** | **First Name** | **Employer** |
| **Cell Phone (     )       -** | **Home Phone (     )       -** | **Work Phone (     )       -** |
| **[ ] Address same as the student** | **Address (if different than student):       Apt.#       City       ST       Zip** |
| **Email:       @** | **Contact #2 Spoken Language**  |
| **[ ]**  | **Please keep me informed regarding my child’s education through email and text messages as needed.** **(e.g., emails from teachers and principals, progress reports, messages from schools, etc.)** |
| **[ ]**  | **I understand the Code of Conduct is available online, but I would still like a printed copy.(Amphitheater Code of Conduct is accessible via the following link:** [**https://www.amphi.com/Domain/1053**](https://www.amphi.com/Domain/1053)**)** |
| **Check all that apply:**  | **[ ]  Can pick up student [ ]  Lives with student [ ]  Is an Emergency Contact**  |
| **[ ]  Receives Report Card [ ]  Can have Parent Portal Access**  |

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| **Who has legal custody of the child?** **[ ]  Contact #1** **[ ]  Contact #2 (Check both if applicable.)** |
| **Is there a joint custody or parenting plan in effect?** **[ ]  Yes** **[ ]  No (If yes, plan must be on file with the school.)** |
| **Is this student in care of a guardian?** **[ ]  Yes** **[ ]  No (If yes, legal guardianship records must be on file with the school.)** |
| **Is there a restraining order in effect?** **[ ]  Yes** **[ ]  No Against:** **[ ]  Mother** **[ ]  Father** **[ ]  Other (Papers must be on file with school.)** |
| **Additional Information:**  |

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| **Additional Contact #3**  |
| **[ ]  Mother [ ]  Father [ ]  Foster Mother [ ]  Foster Father [ ]  Step-Mother [ ]  Step-Father [ ]  Guardian [ ]  Other:**  |
| **Last Name**  | **First Name**  | **#3 Spoken Language**  |
| **Cell Phone (     )       -** | **Home Phone (     )       -** | **Work Phone (     )       -** |
| **Check all that apply:**  | **[ ]  Can pick up student** **[ ] Lives with student** **[ ]  Is an Emergency Contact** **[ ]  Can have Parent Portal Access (Email:       @      )** |
| **Additional Contact #4** |
| **[ ]  Mother [ ]  Father [ ]  Foster Mother [ ]  Foster Father [ ]  Step-Mother [ ]  Step-Father [ ]  Guardian [ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Last Name** | **First Name** | **#4 Spoken Language**  |
| **Cell Phone (     )       -** | **Home Phone (     )       -** | **Work Phone (     )       -** |
| **Check all that apply:**  | **[ ]  Can pick up student [ ] Lives with student [ ]  Is an Emergency Contact [ ]  Can have Parent Portal Access (Email:** **@** **)** |

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| **I VERIFY ALL OF THE INFORMATION ON THIS FORM IS ACCURATE** |
| **Enrolling Parent/Guardian Printed Name** | **Enrolling Parent/Guardian Signature** | **Date** |

Amphitheater Unified School District does not discriminate on the basis of race, color, religion/religious beliefs, gender, sex, age, national origin, sexual orientation, creed, citizenship status, marital status, political beliefs/affiliation, disability, home language, family, social or cultural background in its programs or activities and provides equal access to the Boy Scouts and other designated youth groups. Inquiries regarding the District’s non-discrimination policies are handled at 701 W. Wetmore Road, Tucson, Arizona 85705 by the Equity& Safety Compliance Officer and Title IX Coordinator, (520) 696-5164, or Kristin McGraw, Executive Director of Student Services, (520) 696-5230, kmcgraw@amphi.com.