



Mobile Elementary School District No. 86 Student Enrollment Packet

Partners in Learning for All

42798 S. 99th Ave. | Maricopa, AZ 85139 | Phone: 520-568-2280

Welcome, Mobile Elementary families!

We are excited to welcome your child. Please complete one packet for each student. The school office can help with questions, missing documents, temporary housing, foster care, custody, health needs, language services, and other special circumstances.

Enrollment Checklist

Please submit documents you have available. Office staff will help with special circumstances.

Requested from Parent/Guardian	Office/Audit Use
<input type="checkbox"/> Completed enrollment packet	<input type="checkbox"/> Entry date entered in SIS/Synergy
<input type="checkbox"/> Proof of student's age/identity: birth certificate or other reliable proof	<input type="checkbox"/> Age/identity document copied or follow-up due date set
<input type="checkbox"/> Proof of Arizona residency or shared-residence affidavit	<input type="checkbox"/> Residency document filed; private numbers redacted
<input type="checkbox"/> Immunization record, exemption form, or catch-up schedule	<input type="checkbox"/> Health record checked and follow-up noted
<input type="checkbox"/> Withdrawal form from previous Arizona school, if available	<input type="checkbox"/> Records request sent to previous school
<input type="checkbox"/> Custody/guardianship/court orders, if applicable	<input type="checkbox"/> Pickup restrictions verified by legal document
<input type="checkbox"/> IEP, 504 plan, or evaluation records, if applicable	<input type="checkbox"/> Special Programs notified
<input type="checkbox"/> Parent/guardian photo ID, if available	<input type="checkbox"/> Identity/authority reviewed without creating enrollment barrier

Important enrollment protections

Social Security numbers, citizenship documents, and immigration-status documents are not required. Students experiencing homelessness or foster care receive immediate enrollment support when typical documents are unavailable.



Office Use Only - Enrollment & Audit Checklist

Keep with the student file or use as a working front-office checklist.

Student legal name		Grade	
Entry date		Teacher/homeroom	
SIS/Synergy ID		SSID/AzEDS ID	
Entry code		Resident district	

Required file checks

- Age/identity notice provided. Document received or 30-day follow-up date set: _____
- Arizona residency documentation received/reaffirmed OR McKinney-Vento/foster care exception routed to liaison/administrator.
- Residency supporting documents copied only as needed; account numbers/SSNs/private numbers redacted before filing.
- Home Language Survey completed once, signed/dated, all fields complete, copied to EL Coordinator/Main Contact, and all three responses entered in AzEDS.
- Immunization record, exemption, or catch-up schedule reviewed before attendance unless law requires immediate enrollment exception.
- Previous-school records requested directly. Date sent: _____ Date received: _____
- IEP/504/ELL/health records requested and Special Programs/Health Office notified, if applicable.
- Custody/guardianship documents filed if pickup or educational rights are limited by court order.
- Open enrollment application processed under current Governing Board policy, capacity posting, and waitlist/lottery procedures if applicable.
- Attendance expectations and reporting procedures provided to parent/guardian.

Staff notes / follow-up

Notes	
--------------	--

Registrar/Office Staff Signature

Date

Administrator Review, if needed



1. Student Information

Please write clearly. Use the student's legal name as shown on age/identity documentation.

Legal last name		Legal first name	
Legal middle name		Preferred name/nickname	
Date of birth		Grade requested	
Birth city/state/country		Student ID, if known	
Gender/sex for state reporting	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other/decline to state	Primary phone	

Race/Ethnicity reporting

This information is used for required state/federal reporting and is not used to determine enrollment.

Hispanic/Latino	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Decline to answer	Race	<input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American
Race continued	<input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Two or more races <input type="checkbox"/> Decline to answer	Tribal affiliation, if applicable	

Student address

Physical street address		Apt/unit/space	
City		State/ZIP	
Mailing address, if different		County	

Residency note

A P.O. Box may be used as a mailing address, but proof of residency must show a physical residential address or physical description of the property. Families in temporary housing should complete the McKinney-Vento section and contact the office for help.

Previous school information

Last school attended		District	
City/state		Last date attended	
School phone/fax/email		Withdrawal form attached	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable



2. Parent/Guardian & Household Information

List all parents/guardians who may receive school information and make educational decisions unless a court order says otherwise.

Parent/Guardian 1

Name		Relationship to student	
Lives with student	<input type="checkbox"/> Yes <input type="checkbox"/> No	Contact priority	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Cell phone		Work/alternate phone	
Email		Preferred language	
Address, if different		City/state/ZIP	

Parent/Guardian 2

Name		Relationship to student	
Lives with student	<input type="checkbox"/> Yes <input type="checkbox"/> No	Contact priority	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Cell phone		Work/alternate phone	
Email		Preferred language	
Address, if different		City/state/ZIP	

Custody/guardianship

Are there custody, guardianship, foster placement, or court orders the school must follow? Yes No

Explain / documents attached	Attach current court order, guardianship paperwork, foster placement documentation, or other legal documentation if applicable.
------------------------------	---

Pickup and records access

The school can only enforce custody or pickup restrictions that are supported by current legal documentation on file. Both parents may have educational-record rights unless a court order limits those rights. This includes 504/IEP records as well as consent for evaluation and any permissions.

Please initial that you have received this notification _____



3. Emergency Contacts, Authorized Pickup & Dismissal

Please list at least two local contacts who can be reached if parents/guardians are unavailable.

Emergency Contact / Authorized Pickup #1

Name		Relationship	
Cell phone		Alternate phone	
Address		May pick up student	<input type="checkbox"/> Yes <input type="checkbox"/> No

Emergency Contact / Authorized Pickup #2

Name		Relationship	
Cell phone		Alternate phone	
Address		May pick up student	<input type="checkbox"/> Yes <input type="checkbox"/> No

Emergency Contact / Authorized Pickup #3

Name		Relationship	
Cell phone		Alternate phone	
Address		May pick up student	<input type="checkbox"/> Yes <input type="checkbox"/> No

Individuals NOT authorized to pick up student

Names	<u>Legal documentation must be on file for restrictions.</u>
-------	--

Regular dismissal plan

<input type="checkbox"/> Bus rider	<input type="checkbox"/> Car pickup
<input type="checkbox"/> Walker/bike	<input type="checkbox"/> After-school program
<input type="checkbox"/> Other: _____	

Parent/Guardian Signature

Date



4. Health, Immunization & Medication Information

Information is shared only with staff who need it to support student health and safety.

Primary doctor/clinic		Phone	
Preferred hospital		Dentist, if desired	
Health insurance plan		No insurance / need help	<input type="checkbox"/> No insurance <input type="checkbox"/> Please contact me with resources

Medical conditions and allergies

Chronic/severe conditions	
Allergies	List medication, food, environmental, insect, latex, or other allergies. Attach action plan if needed.
Current medications	List daily and emergency medications. Medication at school requires a separate authorization form.

Immunizations

<input type="checkbox"/> Immunization record attached	<input type="checkbox"/> Medical exemption attached
<input type="checkbox"/> Personal beliefs exemption attached	<input type="checkbox"/> Catch-up schedule attached
<input type="checkbox"/> Office/health staff follow-up needed	

Medication at school

Prescription or over-the-counter medication may only be given at school under current district medication procedures. Medication must be in the original container and must have the required parent/guardian and healthcare-provider authorization when required.

Emergency medical authorization

If the school cannot reach me during an emergency, I authorize school officials to seek emergency medical care for my child as reasonably necessary for the student's health and safety. I understand the school district is not responsible for medical costs.

Parent/Guardian Signature

Printed Name

Date



5. Optional Health Information Exchange Consent

Complete only if you want school health staff, medical providers, and/or insurance plan to coordinate health information for your child.

Student health coordination

To help school and medical providers coordinate my child's health and academic success, I give permission for Mobile Elementary School, my child's physician/clinic, and health insurance plan to exchange health information as needed. Examples may include chronic health conditions, recent hospitalizations, medications, medical procedures at school, immunization data, and vision/hearing screening results.

Student name		Date of birth	
Physician/clinic		Phone	
Health insurance plan		Plan phone	

Parent/Guardian Signature

Printed Name

Date

This consent is voluntary and may be revoked in writing, except to the extent information has already been shared in reliance on the consent.



6. Home Language Survey

Required for all new students. Complete once at initial enrollment.

The responses to this Home Language Survey are used by the school to provide the most appropriate instructional programs and services for the student. The answers below will determine if the student will take the Arizona English Language Learner Assessment (AZELLA). Please respond to each question as accurately as possible. Corrections must be made before the student takes the AZELLA Placement Test.

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

Answer	
---------------	--

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

Answer	
---------------	--

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

Answer			
Student name		District student ID	
Date of birth		SSID	
District/charter	Mobile Elementary School District No. 86	School	Mobile Elementary School

Parent/Guardian Signature

Date

Office use

Provide a copy of this Home Language Survey to the EL Coordinator/Main Contact on site. Enter all three HLS responses in AzEDS. File a hard copy in the cumulative student file.



7. Special Education, Section 504 & Student Support Information

This information helps the school prepare services. It is not used to deny resident enrollment.

Has the student ever received special education services or been evaluated for special education? Yes No

Dates/school/district/state		Current IEP	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Placement/services	<input type="checkbox"/> Resource <input type="checkbox"/> Speech <input type="checkbox"/> Self-contained <input type="checkbox"/> OT/PT <input type="checkbox"/> Other	Exited from special education	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure

Has the student ever received a Section 504 plan or accommodations? Yes No

Dates/school/district/state		Current 504 plan	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
Other supports/concerns	Examples: gifted services, counseling, behavior support, reading/math intervention, speech, hearing/vision needs, assistive technology, medical plan.		

Parent/guardian release

I authorize Mobile Elementary School District No. 86 to request special education, Section 504, evaluation, health, and related education records from the student's prior school or agency as needed to provide appropriate services.

Parent/Guardian Signature

Date



8. Request for Student Records

Office may send this form to the previous school after enrollment.

To the previous school/district listed below: Please furnish educational records for the student named below, including cumulative records, withdrawal form, attendance, grades/progress reports, state testing, health/immunization records, discipline/expulsion records as applicable, ELL/AZELLA records, special education records, Section 504 records, evaluations, and other records needed for enrollment and services.

Previous school/district		Phone	
Address		Fax/email	
City/state/ZIP		Date requested	
Student legal name		Date of birth	
Grade		Last date attended	

Please forward records to:

Mobile Elementary School District No. 86
Student Records
42798 S. 99th Ave.
Maricopa, AZ 85139
Phone: 520-568-2280 | Fax: 520-568-9361

Records release

I authorize the release of educational, health, special education, Section 504, and other school records to Mobile Elementary School District No. 86. Records will be used confidentially and professionally in support of the student's education.

Parent/Guardian Signature

Printed Name

Date

Office note

Current A.R.S. § 15-828(G) requires the enrolling school to request records directly from a prior private school or school district within the statutory timeline and requires the prior school to forward records within 10 school days after receipt unless the record is flagged under A.R.S. § 15-829.



9. Arizona Residency Documentation Form

Required for state-aid residency documentation unless an exception applies, such as McKinney-Vento homelessness.

Student name		School	Mobile Elementary School
School district	Mobile Elementary School District No. 86	Parent/legal guardian	
Residential address		City/state/ZIP	

As the parent/legal guardian of the student, I attest that I am a resident of the State of Arizona and submit a copy of the following document displaying my name and residential address or physical description of the property where the student resides:

<input type="checkbox"/> Valid Arizona driver's license, Arizona identification card, or Arizona motor vehicle registration	<input type="checkbox"/> Valid Arizona Address Confidentiality Program authorization card
<input type="checkbox"/> Real estate deed or mortgage documents	<input type="checkbox"/> Property tax bill
<input type="checkbox"/> Residential lease or rental agreement	<input type="checkbox"/> Water, electric, gas, cable, or phone bill
<input type="checkbox"/> Bank or credit card statement	<input type="checkbox"/> W-2 wage statement
<input type="checkbox"/> Payroll stub	<input type="checkbox"/> Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe in Arizona
<input type="checkbox"/> Documentation from a state, tribal, or federal government agency	<input type="checkbox"/> Temporary on-base billeting facility document for military families
<input type="checkbox"/> Shared residence affidavit attached because I cannot provide one of the documents above in my own name	

Privacy note

Please redact Social Security numbers, account numbers, and other personal numbers from documents before filing. Office staff may also redact unnecessary private information before placing copies in the student file.

Parent/Legal Guardian Signature

Printed Name

Date



10. Affidavit of Shared Residence

Complete only when the parent/legal guardian and student live with another Arizona resident and residency proof is in that resident's name.

Student name		Parent/legal guardian	
School	Mobile Elementary School	District	Mobile Elementary School District No. 86
Name of Arizona resident/affiant		Phone	

I swear or affirm that I am a resident of the State of Arizona and that the persons listed below reside with me at my residence.

Persons residing with me	
Location of residence	

The Arizona resident/affiant must attach a copy of one acceptable residency document showing the resident's name and current residential address or physical description of the property.

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

Printed Name of Affiant

Signature of Affiant

Date

Notary acknowledgement

State of Arizona, County of

The foregoing was acknowledged before me this ____ day of _____, 20__ by

Notary Public

My Commission Expires



11. Student Housing Questionnaire / McKinney-Vento Support

This form is voluntary and helps us determine whether a student may qualify for immediate enrollment support and services.

Student housing rights

Students who lack a fixed, regular, and adequate nighttime residence may qualify for support under the McKinney-Vento Act. Students who qualify have the right to immediate enrollment even when typical records, proof of residency, guardianship documents, or immunization records are not immediately available.

Is your current address a temporary living arrangement? Yes No

Is the temporary arrangement due to loss of housing, economic hardship, or a similar reason? Yes No

Where is the student currently living?

<input type="checkbox"/> Sharing housing with relatives/friends due to hardship or loss of housing	<input type="checkbox"/> Motel/hotel
<input type="checkbox"/> Shelter or transitional housing	<input type="checkbox"/> Moving from place to place
<input type="checkbox"/> Car, campground, public place, abandoned building, or other place not designed for sleeping	<input type="checkbox"/> Unaccompanied youth living apart from parent/guardian
<input type="checkbox"/> Permanent housing - no McKinney-Vento support requested	
Current address or location	
Best phone/email contact	

Students in household

Student name	Grade	School	Notes

Parent/Guardian or Unaccompanied Youth Signature

Date

Office use: Refer to Homeless Education Liaison Transportation support discussed Immediate enrollment completed Follow-up needed



12. Optional Program & Funding Information

This information may help the district identify support services and funding. It is not used to decide whether a student may enroll.

Not used for enrollment decisions

Families are not required to provide citizenship or immigration-status documents for enrollment. The questions below are voluntary and are used only for program eligibility, reporting, and support services.

Was the student born outside the United States? Yes No *Do not list citizenship or immigration documents.*

Has the student attended one or more schools in the United States for less than three full academic years? Yes No

Has the student or family been served by a refugee resettlement agency or refugee support program? Yes No *Optional.*

Is the student a child of an active-duty member of the U.S. Armed Forces or a member killed in the line of duty? Yes No
May support open-enrollment preference under district policy.

Is the student currently in foster care or placed with a caregiver by a child welfare agency? Yes No *If yes, contact the foster care point of contact.*

Notes / agency contact, if family wishes to provide

Parent/Guardian Signature

Date



13. Transportation, Field Trips & School Activities

Please complete so we can plan safe arrival, dismissal, and activity participation.

Transportation request

<input type="checkbox"/> My child will ride the school bus		<input type="checkbox"/> My child will not ride the school bus	
<input type="checkbox"/> I am unsure; please contact me		<input type="checkbox"/> Open-enrollment transportation question - office review needed	
Morning pickup address		Afternoon drop-off address	
Emergency route notes		Parent phone	

Field trip and off-campus activity permission

I give permission for my child to participate in school-sponsored field trips and off-campus activities during the school year. The school will provide notice before field trips. Trips involving unusual cost, distance, overnight travel, water activities, or elevated risk may require separate permission.

<input type="checkbox"/> Yes, my child may participate in routine school-sponsored field trips/off-campus activities
<input type="checkbox"/> No, contact me before any off-campus field trip/activity

Parent/Guardian Signature

Printed Name

Date



14. Media, Directory & Technology Permissions

Please choose the options that are best for your family.

Photo/media permission

Use	Permission
Classroom, school displays, newsletters, yearbook, and school celebrations	<input type="checkbox"/> Yes <input type="checkbox"/> No
District/school website or official social media	<input type="checkbox"/> Yes <input type="checkbox"/> No
News media interviews, photos, or videos	<input type="checkbox"/> Yes <input type="checkbox"/> No
Student artwork, projects, or first name may be displayed for school purposes	<input type="checkbox"/> Yes <input type="checkbox"/> No

Note: The school will make reasonable efforts to honor media choices. This form does not replace the district's annual FERPA/directory information notice.

Parent/Guardian Signature

Date

Technology use agreement

<input type="checkbox"/> Use district technology, internet access, devices, accounts, and digital tools for school purposes only.
<input type="checkbox"/> Use respectful, safe language and never bully, harass, threaten, or impersonate others online.
<input type="checkbox"/> Protect passwords and personal information; do not share another person's private information.
<input type="checkbox"/> Do not bypass filters, damage devices, download unauthorized software, or access inappropriate content.
<input type="checkbox"/> Report unsafe, inappropriate, or damaged technology to a teacher or staff member right away.
<input type="checkbox"/> Understand that district technology may be monitored according to district policy and law.

Student Signature

Parent/Guardian Signature

Date



15. Library Agreement & School-Parent Compact

Together, we help students learn, grow, and feel safe at school.

Library books parent/reader pledge

I understand that library books and school materials are shared resources. I will help my child return borrowed materials on time and in good condition. Families may be responsible for lost or damaged items according to district policy.

Student Signature, if age appropriate

Parent/Guardian Signature

Date

School-Parent Compact

Student Agreement

- Attend school regularly and try my best.
 - Ask for help when I need it.
 - Be safe, respectful, and responsible.
 - Complete classwork and homework to the best of my ability.
- *Have respectful behavior of all adults on campus, follow the campus rules and expectations, and follow directions.

Parent/Guardian Agreement

- Support regular attendance and on-time arrival.
 - Read school messages and contact the school with questions.
 - Encourage reading, homework, and positive routines at home.
 - Partner with teachers and staff to support my child's growth.
- *Support the teacher, bus driver, and school staff in addressing my child's behavior in the classroom, on the bus, and on campus.

School Staff Agreement

- Provide a safe, welcoming learning environment.
- Hold high expectations for every student.
- Communicate with families in a helpful and respectful way.
- Offer opportunities for families to be involved in learning.

Student Signature

Parent/Guardian Signature

Teacher/Administrator Signature

Date



16. Attendance Expectations Acknowledgement

Every day counts at Mobile Elementary.

Regular attendance is one of the strongest supports for student learning. Arizona law defines truancy and excessive absences. A student is habitually truant after five or more truant days in a school year. Absences may be considered excessive when they exceed 10% of the required attendance days, whether excused or unexcused. The school will work with families to support attendance and address barriers. I understand that if my child is absent more than 10 school days during the school year, he or she may be retained and repeat that grade level.

Parent/guardian responsibility

Please notify the office in advance or at the time of any absence. Written documentation may be requested. If your child has a chronic health condition, contact the office/health staff so the school can document and support the student appropriately.

Acknowledgement

I have read and understand Mobile Elementary School's attendance expectations. I understand that it is my responsibility to support my child's regular attendance and to communicate with the school about absences. I understand the school may contact me, provide support, require documentation, and/or follow legal attendance procedures when absences become excessive or truancy concerns arise.

Parent/Guardian Signature

Student Signature

Date



17. Open Enrollment / Attendance Application

Complete this section only for students requesting enrollment outside the resident attendance area or under open enrollment.

Student name		Current grade	
Date of birth		Parent/guardian name	
Home address		City/state/ZIP	
Parent phone		Parent email	
Present school		Present district/county	
Requested assignment	Mobile Elementary School	Requested school year	

Residency status

<input type="checkbox"/> Student resides within Mobile Elementary School District No. 86	<input type="checkbox"/> Student resides outside Mobile Elementary School District No. 86
<input type="checkbox"/> Resident transfer request	<input type="checkbox"/> Nonresident open enrollment request

Discipline/expulsion questions

Has the student ever been expelled from any school or school district? Yes No

Is the student currently in the process of being expelled from any school or school district? Yes No

If yes, explain	
------------------------	--

Open enrollment notice

Open enrollment is processed according to current Arizona law and Governing Board policy. Schools accept pupils throughout the year as capacity allows. If capacity is unavailable, the district will follow waitlist/equitable selection procedures. Admission may not be limited based on protected student characteristics.

I understand transportation may be the responsibility of the parent/guardian unless required by law or district policy. I certify that the information provided is true.

Parent/Legal Guardian Signature

Date

District use only

<input type="checkbox"/> Accepted	<input type="checkbox"/> Placed on waiting list	<input type="checkbox"/> Rejected - reason: _____
<input type="checkbox"/> Capacity verified	<input type="checkbox"/> Decision notice sent to family	<input type="checkbox"/> Open enrollment status entered in SIS

District Administrator/Designee

Date



18. Final Parent/Guardian Certification

Please sign after completing the packet.

I certify that the information I provided in this enrollment packet is true and correct to the best of my knowledge. I understand that I should notify the school promptly if contact information, emergency contacts, custody orders, health information, address, transportation needs, or permissions change.

I also understand that Mobile Elementary School District No. 86 may request records from the student's previous school and may use the information in this packet to provide educational services, maintain required records, meet state and federal reporting obligations, and keep my child safe at school.

Parent/Guardian Signature

Printed Name

Date

Best phone for follow-up

Best email

--	--	--	--



Staff Reference - Modernization & Compliance Crosswalk

This page is for district review and may be removed before parent distribution.

Legacy packet item	Modernized treatment
Legacy request for records	Updated with clear record categories, parent release, FERPA reference, and statutory timeline note.
Legacy open enrollment form	Replaced fixed April 15 deadline with year-round/capacity-based language and nondiscrimination/waitlist notice.
Legacy Synergy enrollment form	Reorganized into readable sections, added preferred name, clarified residence/ mailing address, and updated race/ethnicity reporting.
Social Security number field	Removed. Student SSN is discouraged and not required for enrollment.
Duplicate Home Language Survey questions	Kept one official HLS section using current ADE wording and added AzEDS/EL coordinator office note.
Health and medication pages	Combined for readability; added clear medication-at-school requirement and optional health information exchange consent.
Residency guideline pages	Replaced long guidance pages with parent-friendly ADE-style residency form, shared residence affidavit, redaction note, and office audit checklist.
Refugee/immigrant status wording	Reframed as optional program/funding information and stated it is not used for enrollment decisions.
McKinney-Vento forms	Kept and modernized immediate-enrollment language and voluntary questionnaire.
Media permission	Expanded to separate school publications, website/social media, news media, and student work.
Technology use agreement	Modernized acceptable-use language for current district devices, accounts, digital tools, privacy, and safety.
COVID-19 testing consent	Removed from the standard enrollment packet; use a separate current health-office consent only if the program is active.
Attendance letter	Shortened into a parent acknowledgement using current 5-truant-day and 10%-absence concepts.

Key legal/guidance references used

- A.R.S. § 15-802(B) - Arizona residency documentation; ADE Arizona Residency Guidelines and forms.
- A.R.S. § 15-828 - age/identity documentation, student records, FERPA compliance, and homeless-student exception.
- A.R.S. § 15-816.01 - open enrollment, capacity posting, preferences, nondiscrimination, waitlist/equitable selection, and transportation provisions.
- A.R.S. § 15-872 and § 15-873 - immunization documentation, exemptions, conditional admission, and exceptions.
- A.R.S. § 15-803 and ADE School Finance guidance - truancy/excessive absence definitions, documentation, and attendance reporting.
- Arizona Administrative Code R7-2-306 and ADE/OELAS Home Language Survey guidance (Revised 05-2023) - HLS questions, AzEDS entry, and file retention.
- McKinney-Vento Homeless Assistance Act, 42 U.S.C. § 11432 - immediate enrollment and removal of barriers for eligible students.
- FERPA, 20 U.S.C. § 1232g - confidentiality and disclosure of education records.