

STUDENT ID #

GLOBE UNIFIED SCHOOL DISTRICTGlobe High School ☐ High Desert Middle School ☐ Copper Rim Elementary ☐

Grade _____

ENROLLMENT CODE _____

Teacher _____

DATE DATA ENTERED/INT. _____

Enrollment date _____

FOR OFFICE USE ONLY

OPEN ENROLLMENT Yes ☐ No ☐**Please indicate if your child has had any of these services:**Individualized Education Plan: Yes ☐ No ☐Early Language Learner: Yes ☐ No ☐Hearing/Vision/Speech: Yes ☐ No ☐Enrichment/Gifted: Yes ☐ No ☐Title 1 Services: Yes ☐ No ☐504 Plan: Yes ☐ No ☐Special Education Services: Yes ☐ No ☐Special Education Eval.: Yes ☐ No ☐

Has this student ever attended <u>any</u> AZ. school? Yes <input type="checkbox"/> No <input type="checkbox"/>		Has this student ever been asked to leave school pending board action? (if yes please attach explanation) Yes <input type="checkbox"/> No <input type="checkbox"/>	
Has this student ever attended a Globe School Yes <input type="checkbox"/> No <input type="checkbox"/>			
Student Legal Last Name	Student Legal First Name	Student Legal Middle Name	Grade
			Sex
Street Address		City	Zip Code
Mailing Address		City	Zip Code
Home Phone # ()	Date of Birth mm/dd/yyyy	Country of Birth	State of Birth
		Foreign Exchange Yes <input type="checkbox"/> No <input type="checkbox"/>	
IS THIS STUDENT HISPANIC / LATINO OF ANY RACE? <input type="checkbox"/> Yes <input type="checkbox"/> No Mark all races below which apply (must choose at least one race): <input type="checkbox"/> White <input type="checkbox"/> Black / African America <input type="checkbox"/> Asian <input type="checkbox"/> American Indian / Alaskan Native <input type="checkbox"/> Native Hawaiian / Other Pacific Islander			
Tribal/Clan name (If applicable)			
What is the primary language used in the home regardless of the language spoken by the student?			
What is the language most often spoken by the student?			
What is the language that the student first acquired?			
LAST SCHOOL ATTENDED		Date Attended	Specify any learning problem (s) or special help needed:
Address of last School Attended		City	Zip Code
Student is living with: <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother Only <input type="checkbox"/> Father Only <input type="checkbox"/> Guardian <input type="checkbox"/> Mother/Stepfather <input type="checkbox"/> Father/Stepmother <input type="checkbox"/> Grandparents			
If divorced, who has legal custody?		Are there special visitation rights (during school hours)? If yes , please specify:	
<input type="checkbox"/> Both Parents <input type="checkbox"/> Mother Only <input type="checkbox"/> Father Only			
Father's First Name	Father's Last Name	Work Phone	
Email		Employer	
		Cell Phone	
Mother's First Name	Mother's Last Name	Work Phone	
Email		Employer	
		Cell Phone	

Mother's Signature

Date

OR

Father's Signature

Date

Signature MUST be student's Parent or Legal Guardian

SEE BACK

❖ We encourage you to make careful selections when choosing contacts. Please keep in mind that reliable contact information is VERY important and as phone numbers change frequently, keeping information current may become a challenge when there are more than 4 contacts.

PERSONS AUTHORIZED TO RELEASE STUDENT FROM SCHOOL OR CONTACT IN CASE OF EMERGENCY, OTHER THAN THE PARENT OR GUARDIAN (MUST BE 18 YEARS OR OLDER)

First Name	Last Name	Cell Phone
Relationship		
First Name	Last Name	Cell Phone
Relationship		
First Name	Last Name	Cell Phone
Relationship		
First Name	Last Name	Cell Phone
Relationship		

MEDICAL HISTORY

Student Name _____

Are there any physical conditions that we should be aware of and/or any precautions that should be taken? (heart trouble, hearing impairment, vision problems, asthma, diabetes, epilepsy, ADHD, allergies, etc?)

If your child is taking any medications prescribed by a physician, please list:

It will be the responsibility of the parent or guardian to update the above information as changes occur. If an emergency involving medical action or treatment is required and neither the parents or guardian nor the family physician can be contacted for consent, the parents hereby consent to the rendering of such medical services as shall be deemed necessary in the medical opinion of the Doctor rendering such service. This might also include ambulance service. It is understood by the signer that they are financially responsible for the expense of such services.

PARENT NAME (Please print) _____

Signature of Parent/Guardian

Date



Arizona Department of Education
Arizona Residency Guidelines
REVISED 5/21/2019

INTRODUCTION

Local educational agencies are required to provide all children who reside within the school district with equal access to public education at the elementary and secondary level. The U.S. Supreme Court held in *Plyer v. Doe*, 457 U.S. 202 (1982), that the undocumented or non-citizen status of a student (or his or her parent/guardian) is irrelevant to that student's entitlement to an elementary and secondary public education. However, pursuant to A.R.S. § 15-823, a school district or charter school may not include non-Arizona-resident pupils in their student count and may not obtain state aid for those pupils.

In Arizona, the “district of residence” of a student is determined by the residency of the parent or guardian with whom the student lives. In some cases, the district of residence may also be determined by the residency of a relative who is seeking legal guardianship or custody of a student. A.R.S. § 15-821(D). In addition, if a school district governing board determines that a student's “physical, mental, moral or emotional health is best served by placement with a grandparent, brother, sister, stepbrother, stepsister, aunt or uncle who is a resident within the school district,” and the placement with that relative is not “solely for the purpose of obtaining an education in this state without payment of tuition,” the student is considered a resident of the district. A.R.S. § 15-823(C).¹

Accordingly, it is the responsibility of the school districts and charter schools that receive state aid to ensure that student/parent residency information is accurate and verifiable. **While a district may restrict attendance to district residents based on available classroom space,² inquiring into students' citizenship or immigration status, or that of their parents or guardians, is not relevant to establishing residency within the district. A school district or charter school may not bar a student from enrolling because he or she lacks a birth certificate or has records indicating a foreign place of birth, such as a foreign birth certificate.³**

The Arizona Department of Education may audit schools to ensure that only Arizona resident students are reported for state aid. Any school district or charter school that cannot demonstrate the accuracy of any student's residency through documents provided by the parent/guardian may be required to repay the state aid received for that student. The following are examples of verifiable documentation parents may provide to demonstrate that they reside in a district.

VERIFIABLE DOCUMENTATION

A.R.S. § 15-802(B) requires school districts and charter schools to obtain and maintain verifiable documentation of Arizona residency upon enrollment in an Arizona public school. This document is designed to assist school districts and charter schools in meeting the legal requirements of the statute.

The documentation required by A.R.S. § 15-802 **must be provided at initial enrollment of a student in a school district or charter school in this state and reaffirmed, although not necessarily recollected, during the**

¹ See also *Martinez v. Bynum*, 461 U.S. 321 (1983).

² Pursuant to A.R.S. § 15-816 and A.R.S. § 15-816.01, Arizona's mandatory open enrollment policies allow a student to apply for admission and transfer to any public school of his or her choice, based on available classroom space, even if it is outside of the student's district of residence. There are two basic types of open enrollment policies: 1) Intra-district: Students transfer to another school within the resident school district, or 2) Inter-district: Students transfer to a school outside of their resident district.

³ For more information, please read <https://www2.ed.gov/about/offices/list/ocr/letters/colleague-201405.pdf>.

district or charter's annual registration process. This process will vary by the school, school district, or charter school (i.e. an annual form asking parents to confirm address).

Every school district or charter school is required,⁴ within 30 days of enrollment, to obtain a certified copy of a pupil's birth certificate or other reliable proof of the pupil's identity and age,⁵ or a letter from the authorized representative of an agency having custody of the pupil pursuant to title 8, chapter 2 certifying that the pupil has been placed in the custody of the agency as prescribed by law. A school district or charter school MAY seek photo identification from the person enrolling a student to ensure that the adult is entitled to enroll the student in school, as long such a requirement does NOT unlawfully bar a student from enrolling in school.⁶

In case of an ADE Audit, the school, school district or charter school will be asked what process is used and what documentation is obtained via this process. If the student's residence has not changed, an affirmation (via a checkbox) that the previously provided proof of residency remains accurate should be sufficient. The documentation supporting Arizona residency should be maintained according to the school's records retention schedule.

For members of the armed services, a school may enroll a student if the parent provides a hard-copy or electronic document of their transfer or pending transfer to a military installation within the state. The parent must provide official documentation of residency within ten days after the arrival date which may include a temporary on-base billeting facility as their address. **PROOF OF RESIDENCY IS NOT REQUIRED FOR HOMELESS STUDENTS.**⁷ 42 U.S.C. § 11 432(g)(3)(C)(i).

In general, students will fall into one of two groups: (1) those whose parent or legal guardian is able to provide documentation bearing his or her name and address; and (2) those whose parent or legal guardian cannot document his or her own residence because of extenuating circumstances including, but not limited to, that the family's household is multi-generational. Different documentation is required for each circumstance.

1. Parent(s) or legal guardian(s) that maintains his or her own residence: The parent or legal guardian must complete and sign a form indicating his or her name, the name of the school district, school site, or charter school in which the student is being enrolled, and provide **one** of the following documents, which bear the parent or legal guardian's full name and residential address or physical description of the property where the student resides (no P.O. Boxes):

- Valid Arizona driver's license, Arizona identification card
- Valid Arizona motor vehicle registration
- Valid Arizona Address Confidentiality Program authorization card
- Property deed/Mortgage documents
- Property tax bill
- Rental agreement or lease (including Section 8 agreement or off-base military housing)
- Utility bill (water, electric, gas, cable, phone)
- Bank or credit card statement
- W-2 wage statement
- Payroll stub

⁴ A.R.S. § 15-828.

⁵ Other proof of the pupil's identity/age includes: pupil's baptismal certificate, an application for social security number or original school registration records and an affidavit explaining inability to provide a copy of the birth certificate, A.R.S. § 15-828 (A)(1)-(3).

⁶ For more information, please read U.S. DOJ Civil Rights Division "Fact Sheet: Information on the Rights of All Children to Enroll in School", <https://www.justice.gov/sites/default/files/crt/legacy/2014/05/08/plylerfact.pdf>.

⁷ Per A.R.S. § 15-824 (C), "Homeless student" means a pupil who has a primary residence that is: (1) A supervised publicly or privately operated shelter designed to provide temporary living accommodations; (2) An institution that provides a temporary residence for individuals intended to be institutionalized or; (3) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

- Certificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian tribe located in Arizona
- Other documentation from a state, tribal, or federal agency (Social Security Administration, Veterans' Administration, Arizona Department of Economic Security, etc.)
- Temporary on-base billeting facility (for military families)

*A model Arizona Residency Documentation Form is available for schools at the end of this document.

2. **Parent(s) or legal guardian(s) that does not maintain his or her own residence:** The parent or legal guardian must have an **affidavit of shared residency** form completed indicating his or her name, the name of the school district, school site, or charter school in which the student is being enrolled, and submit a signed, notarized affidavit for the person who maintains the residence where the student lives attesting to the fact that the student resides at that address, along with a document from the bulleted list bearing the name and address of the person who maintains the residence.

*A model Affidavit of Shared Residence form is available for schools at the end of this document.

USE OF AND RETENTION OF DOCUMENTS BY SCHOOLS

School officials must **retain a copy** of the attestations or affidavits and copies of any supporting documentation presented for each student (photocopies acceptable) that school officials believe establish validity. Documents presented may be different in each circumstance, and unique to the living situation of the student. Documents retained by the school district or charter school may be used as an indication of residency; however, documentation is subject to audit by the Department.

Personally identifiable information other than name and address (SSN, account numbers, etc.) should be redacted from the documentation either by the parent/guardian or the school official prior to filing. **MOST INFORMATION PROVIDED BY PARENTS AND GUARDIANS TO ARIZONA PUBLIC SCHOOLS IS AN EDUCATIONAL RECORD MADE CONFIDENTIAL UNDER THE FEDERAL EDUCATIONAL RIGHTS AND PRIVACY ACT AND ARIZONA LAW UNLESS DESIGNATED BY THE SCHOOL AS DIRECTORY INFORMATION. A PARENT OR GUARDIAN MAY OPT OUT OF DIRECTORY INFORMATION IN ACCORDANCE WITH DISTRICT POLICY. OTHERWISE, EDUCATIONAL RECORDS ARE ONLY USED FOR LEGITIMATE EDUCATIONAL PURPOSES.**



**Arizona Department of Education
Arizona Residency Documentation Form**

Student _____ School _____

School District or Charter Holder _____

Parent/Legal Guardian _____

As the Parent/Legal Guardian of the Student, I attest* that I am a resident of the State of Arizona and submit in support of this attestation a copy of the following document that displays my name and residential address or physical description of the property where the student resides:

- _____ Valid Arizona driver's license, Arizona identification card or motor vehicle registration
- _____ Valid Arizona Address Confidentiality Program authorization card
- _____ 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) or other identification issued by a recognized Indian tribe in Arizona
- _____ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)
- _____ Temporary on-base billeting facility (for military families)

_____ I am currently unable to provide any of the foregoing documents. Therefore, I have provided an original affidavit signed and notarized by an Arizona resident who attests that I have established residence in Arizona with the person signing the affidavit.

Signature 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 on-base billeting facility as the address for proof of residency.



**State of Arizona
Affidavit of Shared Residence**

Student Name: _____

Parent/Legal Guardian Name: _____

School Name: _____

School District or Charter Holder: _____

Name of Arizona Resident: _____

I, (resident name) _____ 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, described as follows:

Persons who reside with me: _____

Location of my residence: _____

I submit in support of this attestation a copy of the following document that displays my name and current residence address or physical description of my property:

- _____ Valid Arizona driver's license, Arizona identification card or motor vehicle registration
- _____ Valid Arizona Address Confidentiality Program authorization card
- _____ 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) or other identification issued by a recognized Indian tribe in Arizona
- _____ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)

Printed Name of Affiant: _____

Signature of Affiant: _____

Acknowledgement

State of Arizona

County of _____

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

By _____

My Commission Expires:

Notary Public



State of Arizona
Department of Education
Office of English Language Acquisition Services

**Primary Home Language Other Than English (PHLOTE)
Home Language Survey**
(Effective April 4, 2011)

These questions are in compliance with Arizona Administrative Code, R7-2-306(B)(1), (2)(a-c).

Responses to these statements will be used to determine whether the student will be assessed for English Language Proficiency.

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? _____

Student Name _____ Student ID _____

Date of Birth _____ SAIS ID _____

Parent/Guardian Signature _____ Date _____

District or Charter _____

School _____

Please provide a copy of the Home Language Survey to the ELL Coordinator/Main Contact on site.

In SAIS, please indicate the student's home or primary language.



Estado de Arizona
Departamento de Educación
Servicios de Aprendizaje del Inglés

Idioma Principal en el Hogar excluyendo el inglés (PHLOTE)
Encuesta sobre el Idioma en el Hogar
(Efectivo el 4 de abril de 2011)

Preguntas en conformidad con R7-2-306(B)(1), (2)(a-c) del Reglamento de la Junta Directiva.

Las respuestas que proporcione a las preguntas siguientes serán usadas para determinar si se evaluará la competencia en el idioma inglés de su hijo(a).

1. ¿Cuál idioma se habla principalmente en su hogar sin considerar el idioma que habla el estudiante? _____
2. ¿Cuál idioma habla el estudiante con mayor frecuencia? _____
3. ¿Cuál fue el primer idioma que aprendió el estudiante? _____

Nombre del estudiante _____ Núm. de identificación _____

Fecha de nacimiento _____ Núm. de SAIS _____

Firma del padre o tutor _____ Fecha _____

Distrito o Charter _____

Escuela _____

Please provide a copy of the Home Language Survey to the ELL Coordinator/Main Contact on site.

In SAIS, please indicate the student's home or primary language.

IJNDB © USE OF TECHNOLOGY RESOURCES IN INSTRUCTION

Appropriate use of Electronic Information Services

The District may provide electronic information services (EIS) to qualified students, teachers, and other personnel who attend or who are employed by the District. Electronic information services include networks (e.g., LAN, WAN, Internet), databases, and any computer-accessible source of information, whether from hard drives, tapes, compact disks (CDs), floppy disks, or other electronic sources. The use of the services shall be in support of education, research, and the educational goals of the District. To assure that the EIS is used in an appropriate manner and for the educational purposes intended, the District will require anyone who uses the EIS to follow its guidelines and procedures for appropriate use. Anyone who misuses, abuses, or chooses not to follow the EIS guidelines and procedures will be denied access to the District's EIS and may be subject to disciplinary and/or legal action.

The Superintendent shall determine steps, including the use of an Internet filtering mechanism, that must be taken to promote the safety and security of the use of the District's online computer network when using electronic mail, chat rooms, instant messaging, and other forms of direct electronic communications. Technology protection measures shall protect against Internet access by both adults and minors to visual depictions that are obscene, child pornography or, with respect to use of computers by minors, harmful to minors. Safety and security mechanisms shall include online monitoring activities.

As required by the Children's Internet Protection Act, the prevention of inappropriate network usage includes unauthorized access, including "hacking," and other unlawful activities; unauthorized disclosure, use and dissemination of personal identification information regarding minors.

It is the policy of the Board to:

- A. prevent user access over the District's computer network, or transmissions of, inappropriate material via Internet, electronic mail, or other forms of direct electronic communications;
- B. prevent unauthorized access and other unlawful online activity;
- C. prevent unauthorized online disclosure, use, or dissemination of personal identification information of minors; and
- D. comply with the Children's Internet Protection Act [P.L. No. 106-554 and 47 U.S.C. 254(h)].

Each user will be required to sign an EIS user's agreement. The District may log the use of all systems and monitor all system utilization. Accounts may be closed and files may be deleted at any time. The District is not responsible for any service interruptions, changes, or consequences. The District reserves the right to establish rules and regulations as necessary for the efficient operation of the electronic information services.

The District does not assume liability for information retrieved via EIS, nor does it assume any liability for any information lost, damaged, or unavailable due to technical or other difficulties.

Filtering and Internet Safety

As required by the Children's Internet Protection Act, the District shall provide for technology protection measures that protect against Internet access by both adults and minors to visual depictions that are obscene, child pornography, or, with respect to use of the computers by students, harmful to students. The protective measures shall also include monitoring the online activities of students.

Limits, controls, and prohibitions shall be placed on student:

- A. Access to inappropriate matter.
- B. Safety and security in direct electronic communications.
- C. Unauthorized online access or activities.
- D. Unauthorized disclosure, use and dissemination of personal information.

Education, Supervision and Monitoring

It shall be the responsibility of all District employees to be knowledgeable of the Board's policies and administrative guidelines and procedures. Further, it shall be the responsibility of all employees, to the extent prudent to an individual's assignment to educate, supervise, and monitor appropriate usage of the online computer network and access to the Internet in accordance with this policy, the Children's Internet Protection Act, and the Protecting Children in the 21st Century Act.

The Superintendent shall provide for appropriate training for District employees and for students who use the District's computer network and have access to the Internet. Training provided shall be designed to promote the District's commitment to:

- A. the standards and acceptable use of the District's network and Internet services as set forth in District policy;
- B. student safety in regards to use of the Internet, appropriate behavior while using, but not limited to, such things as social networking Web sites, online opportunities and chat rooms; and cyberbullying awareness and response; and compliance with E-rate requirements of the Children's Internet Protection Act.

While training will be subsequently provided to employees under this policy, the requirements of the policy are effective immediately. Employees will be held to strict compliance with the requirements of the policy and the accompanying regulation, regardless of whether training has been given.

The Superintendent is responsible for the implementation of this policy and for establishing and enforcing the District's electronic information services guidelines and procedures for appropriate technology protection measures (filters), monitoring, and use.

Parent Notification

Parents will be notified of the policies regarding the use of technology and the Internet while at school. Parents will also be notified of their ability to prohibit the student from the use of technology and the Internet while at school in which covered information may be shared with an operator pursuant to A.R.S. [15-1046](#). This does not apply to software or technology that is

used for the daily operations or administration of a local education agency or Arizona Online instruction programs authorized pursuant to A.R.S. [15-808](#).

Adopted: November 15, 2017

LEGAL REF.:

A.R.S.

[13-2316](#)

[13-3506.01](#)

[13-3509](#)

[15-341](#)

[15-808](#)

[15-1046](#)

[34-501](#)

[34-502](#)

20 U.S.C. 9134, The Children's Internet Protection Act

47 U.S.C. 254, Communications Act of 1934 (The Children's Internet Protection Act)

IJNDB-E ©**EXHIBIT****USE OF TECHNOLOGY RESOURCES
IN INSTRUCTION****ELECTRONIC INFORMATION SERVICES
USER AGREEMENT**

Details of the user agreement shall be discussed with each potential user of the electronic information services (EIS). When the signed agreement is returned to the school, the user may be permitted use of EIS resources.

Terms and Conditions

Acceptable use. Each user must:

- A. Use the EIS to support personal educational objectives consistent with the educational goals and objectives of the School District.
- B. Agree not to submit, publish, display, or retrieve any defamatory, inaccurate, abusive, obscene, profane, sexually oriented, threatening, racially offensive, or illegal material.
- C. Abide by all copyright and trademark laws and regulations.
- D. Not reveal home addresses, personal phone numbers or personally identifiable data unless authorized to do so by designated school authorities.
- E. Understand that electronic mail or direct electronic communication is not private and may be read and monitored by school employed persons.
- F. Not use the network in any way that would disrupt the use of the network by others.
- G. Not use the EIS for commercial purposes.
- H. Follow the District's code of conduct.
- I. Not attempt to harm, modify, add/or destroy software or hardware nor interfere with system security.
- J. Understand that inappropriate use may result in cancellation of permission to use the educational information services (EIS) and appropriate disciplinary action up to and including expulsion for students.

In addition, acceptable use for District employees is extended to include requirements to:

- A. Maintain supervision of students using the EIS.
- B. Agree to directly log on and supervise the account activity when allowing others to use District accounts.
- C. Take responsibility for assigned personal and District accounts, including password protection.

D. Take all responsible precautions, including password maintenance and file and directory protection measures, to prevent the use of personal and District accounts and files by unauthorized persons.

Personal responsibility. I will report any misuse of the EIS to the administration or system administrator, as is appropriate.

I understand that many services and products are available for a fee and *acknowledge my personal responsibility for any expenses incurred without District authorization.*

Network etiquette. I am expected to abide by the generally acceptable rules of network etiquette. Therefore, I will:

A. *Be polite and use appropriate language.* I will not send, or encourage others to send, abusive messages.

B. *Respect privacy.* I will not reveal any home addresses or personal phone numbers or personally identifiable information.

C. *Avoid disruptions.* I will not use the network in any way that would disrupt use of the systems by others.

D. *Observe the following considerations:*

1. Be brief.
2. Strive to use correct spelling and make messages easy to understand.
3. Use short and descriptive titles for articles.
4. Post only to known groups or persons.

Services

The School District specifically denies any responsibility for the accuracy of information. While the District will make an effort to ensure access to proper materials, the user has the ultimate responsibility for how the electronic information services (EIS) is used and bears the risk of reliance on the information obtained.

I have read and agree to abide by the School District policy and regulations on appropriate use of the electronic information system, as incorporated herein by reference.

I understand and will abide by the provisions and conditions indicated. I understand that any violations of the above terms and conditions may result in disciplinary action and the revocation of my use of information services.

Name _____

Signature _____ Date _____
(Student or employee)

School _____ Grade (if a student) _____

Note that this agreement applies to both students and employees.

The user agreement of a student who is a minor must also have the signature of a parent or guardian who has read and will uphold this agreement.

Parent or Guardian Cosigner

As the parent or guardian of the above named student, I have read this agreement and understand it. I understand that it is impossible for the School District to restrict access to all controversial materials, and I will not hold the District responsible for materials acquired by use of the electronic information services (EIS). I also agree to report any misuse of the EIS to a School District administrator. (Misuse may come in many forms but can be viewed as any messages sent or received that indicate or suggest pornography, unethical or illegal solicitation, racism, sexism, inappropriate language, or other issues described in the agreement.)

I accept full responsibility for supervision if, and when, my child's use of the EIS is not in a school setting. I hereby give my permission to have my child use the electronic information services.

Parent or Guardian Name (print) _____

Signature _____ Date _____

IJNDB-R ©**REGULATION****USE OF TECHNOLOGY RESOURCES
IN INSTRUCTION****(Safety and use of Electronic
Information Services)**

Use of the electronic information services (EIS) requires that the use of the resources be in accordance with the following guidelines and support the education, research, and educational goals of the District. Filtering, monitoring, and access controls shall be established to:

- A. Limit access by minors to inappropriate matter on the Internet and World Wide Web.
- B. Monitor the safety and security of minors when using electronic mail, chat rooms, and other forms of direct electronic communications.
- C. Monitor for unauthorized access, including so-called "hacking," and other unlawful activities by minors online.
- D. Restrict access by minors to materials harmful to minors.

Content Filtering

A content filtering program or similar technology shall be used on the networked electronic information services (EIS) as well as on standalone computers capable of District authorized access to the Internet. The technology shall at a minimum limit access to obscene, profane, sexually oriented, harmful, or illegal materials. Should a District adult employee have a legitimate need to obtain information from an access-limited site, the Superintendent may authorize, on a limited basis, access for the necessary purpose specified by the employee's request to be granted access.

**Education, Supervision, and
Monitoring**

It is the responsibility of all District employees to be knowledgeable of the Board's policy and administrative regulations and procedures related to the use of technology resources. Employees are further responsible, to the extent prudent to an individual's assignment, to educate, supervise, and monitor student use of the District's online computer network use. District, department, and school administrators shall provide employees with appropriate in-servicing and assist employees with the implementation of Policy IJNDB.

As a means of providing safety and security in direct electronic communications and to prevent abuses to the appropriate use of electronic equipment, all computer access to the Internet through the District electronic information services (EIS) or standalone connection shall be monitored periodically or randomly through in-use monitoring or review of usage logs.

Access Control

Individual access to the EIS shall be by authorization only. Designated personnel may provide authorization to students and staff who have completed and returned an electronic information

services user agreement. The Superintendent may give authorization to other persons to use the EIS.

Acceptable Use

Each user of the EIS shall:

- A. Use the EIS to support personal educational objectives consistent with the educational goals and objectives of the School District.
- B. Agree not to submit, publish, display, or retrieve any defamatory, inaccurate, abusive, obscene, profane, sexually oriented, threatening, racially offensive, or illegal material.
- C. Abide by all copyright and trademark laws and regulations.
- D. Not reveal home addresses, personal phone numbers or personally identifiable data unless authorized to do so by designated school authorities.
- E. Understand that electronic mail or direct electronic communication is not private and may be read and monitored by school employed persons.
- F. Not use the network in any way that would disrupt the use of the network by others.
- G. Not use the EIS for commercial purposes.
- H. Follow the District's code of conduct.
- I. Not attempt to harm, modify, add, or destroy software or hardware nor interfere with system security.
- J. Understand that inappropriate use may result in cancellation of permission to use the electronic information services (EIS) and appropriate disciplinary action up to and including expulsion for students.

In addition, acceptable use for District employees is extended to include requirements to:

- A. Maintain supervision of students using the EIS.
- B. Agree to directly log on and supervise the account activity when allowing others to use District accounts.
- C. Take responsibility for assigned personal and District accounts, including password protection.
- D. Take all responsible precautions, including password maintenance and file and directory protection measures, to prevent the use of personal and District accounts and files by unauthorized persons.

Each user will be required to sign an EIS user agreement. A user who violates the provisions of the agreement will be denied access to the information services and may be subject to disciplinary action. Accounts may be closed and files may be deleted at any time. The District is not responsible for any service interruptions, changes, or consequences.

Details of the user agreement shall be discussed with each potential user of the electronic information services. When the signed agreement is returned to the school, the user may be permitted use of EIS resources through school equipment.

Globe Unified School District #1 Transportation Information Form

PLEASE NOTE: There is a 10 minute window before and after bus stop scheduled time.

For reasons of safety and liability, the transportation department needs the following information on each student. If your child will be riding the bus to or from school, please complete the following form and return it to the school.

You must establish one regular destination for student transportation to avoid any confusion and to keep transportation highly efficient.

Date _____

Student's Name _____ Sex _____

Date of Birth _____ Grade _____

School _____ Teacher _____

Parent or Guardian's Name _____

Home Phone:

Work Phone:

Cell Phone:

Alternate Contact _____

Home Phone:

Work Phone:

Cell Phone:

It is **VERY** important to have current contact information for bus changes etc. Please notify the School when there is a change in contact information.

AM Route # _____

Bus stop student will be picked up at _____

PM Route # _____

Bus stop student will be dropped off _____

Will this student ride the special education bus? Yes ☐ No ☐

If this student will be riding on a special education bus, please provide physical address:

Is this student a preschooler? Yes ☐ No ☐

When does your Preschooler attend school? Morning ☐ Afternoon ☐

Parent or Guardian's please note:

Under no circumstances will a kindergarten or Preschool student be let off the bus at the specified stop without a Parent or Guardian present to accept your child.

Parent or Guardian's Signature

**ADMINISTERING MEDICINE
TO STUDENTS**

REQUEST FOR GIVING MEDICINE AT SCHOOL

Name_____Grade_____

Teacher_____School_____

Medication_____

Diagnosis/reason for giving_____

Prescription medication must be in the original container as prepared by a pharmacist and labeled, including the patient name, name of medication, dosage, and time to be given. An over-the counter medication must be in the original packaging, with all directions, dosages, compound contents, and proportions clearly marked. Student misuse of medication being self-administered may result in seizure and disciplinary action.

Parent/Guardian Signature

Date

A signed Physician's statement indicating the necessity must Accompany any request for self-administration of medicine, whether it is prescription or over-the-counter medication.

Globe Unified School District #1 Parent-Teacher-Student Compact

Globe Unified School District believes that learning can take place best when there is a shared effort, interest, and motivation by students, parents and staff. The principal is committed to supporting all these components to achieve better learning. We are committed to each student's success in school and promise to work together to promote his or her achievement.

Therefore:

As a successful student, I will....

- Come to school every day, unless ill, and arrive at school and class on time.
- Come to school dressed appropriately, with necessary materials and prepared to work.
- Respect the rights and property of others, following all school rules.
- Make sure that my actions do not interfere with the learning of others.
- Ask my teacher questions when I do not understand.
- Accept responsibility for myself, knowing that there are consequences for my actions.
- Accept responsibility for my learning and complete all assignments on time.

As a parent of a successful student, I will....

- Provide ample, quiet homework time, encouraging good study habits and regular reading.
- See that my child comes to school every day well rested and on time.
- Support the school staff in their effort to promote appropriate behavior.
- Limit the time my child spends with non-educational media such as television, video games and movies.
- Communicate regularly with my child's teacher and contact the teacher when I have questions and/or concerns.
- Attend conferences as requested.
- Encourage my child to respect the rights and property of others, while obeying school rules.
- Check my child's planner daily for assignments or other communications.

As the teacher of a successful student, I will...

- See that each student receives a well-planned day of instruction for each day, aligned with the Arizona State Standards.
- Maintain open communications by keeping parents informed of the student's school performance.
- Respond to the student as an individual each day, indicating by my positive behavior and high expectations that the student is valued, has strengths and will achieve.
- Employ various teaching methods to educate each student as fully as possible.
- Protect the right of each student to learn.
- Show sensitivity to the feelings, needs and cultures of parents and students.
- Collect, review, evaluate and respond to student work promptly.
- Provide a safe and positive school environment.

Student Name (please print) _____

Student Signature: _____

Parent/Guardian: _____

Teacher Representative: _____ Grade: _____

U.S. DEPARTMENT OF EDUCATION
OFFICE OF INDIAN EDUCATION
WASHINGTON, DC 20202
TITLE VII STUDENT ELIGIBILITY CERTIFICATION
Elementary and Secondary Education Act, Title VII, Part A, Subpart 1

Parents: Please return this completed form to your child's school. In order to apply for a formula grant under the Indian Education Program, your child's school must determine the number of Indian children enrolled. Any child who meets the following definition may be counted for this purpose. You are not required to complete or submit this form to the school. However, if you choose not to submit a form, the school cannot count your child for funding under the program. **This form will become part of your child's school record and will not need to be completed every year.** This form will be maintained at the school and information on the form will not be released without your written approval.

Definition: Indian means any individual who is (1) a member (as defined by the Indian tribe or band) of an Indian tribe or band, including those Indian tribe or bands terminated since 1940, and those recognized by the State in which the tribe or band reside; or (2) a descendent in the first or second degree (parent or grandparent) as described in (1); or (3) considered by the Secretary of the Interior to be an Indian for any purpose; or (4) an Eskimo or Aleut or other Alaska Native; or (5) a member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994.

NAME OF CHILD _____ Date of Birth _____

(As shown on school enrollment records)

School Name _____ Grade _____

NAME OF TRIBE, BAND OR GROUP _____

Tribe, Band or Group is: (check one)

_____ Federally Recognized, Including Alaska Native	_____ State Recognized	_____ Terminated	_____ Organized Indian Group Meeting #5 of the Definition Above
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Name of individual with tribal membership: _____

Individual named is (check one): _____ Child _____ Child's Parent _____ Child's Grandparent

Proof of membership, as defined by tribe, band, or group is:

Membership or enrollment number (if readily available) _____ OR ③

Other (explain) _____

Name and address of organization maintaining membership data for the tribe, band or group:

I verify that the information provided above is accurate:

PARENT'S SIGNATURE _____ DATE _____

Mailing Address _____ Telephone _____

Notice: Public Reporting Burden Notice on Reverse Side

PAPERWORK BURDEN STATEMENT

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1810-0021. The time required to complete this portion of the information collection per type of respondent is estimated to average: 15 minutes per Indian student certification (ED 506) form; including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, D.C. 20202-4651. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** Office of Indian Education, U.S. Department of Education, 400 Maryland Avenue, S.W., FOB-6/Room 5C152, Washington, D.C. 20202-6335.

OPEN ENROLLMENT
ATTENDANCE APPLICATION

File this application at the School District Office

Student's name _____
Last First M.I. _____

Current grade _____ Birth date _____ Home phone _____

Work phone _____ Message phone _____

Parent's name _____
Last First M.I. _____

Home address _____
Street City Zip _____

E-mail address _____

The above-named student: ☐ resides outside the School District; *or*
☐ resides within the School District

Present school of attendance

School _____ District _____

City _____ County _____

Request assignment to _____ School

Is the above-named student:

☐ Yes ☐ No Expelled or long-term suspended from any school or school district?

☐ Yes ☐ No Currently subject to expulsion or long-term suspension from a school or school district?

☐ Yes ☐ No ☐ N/A In compliance with conditions imposed by a juvenile court?

☐ Yes ☐ No ☐ N/A In compliance with a condition of disciplinary action in any school or school district?

Note: The following conditions apply to the open-enrollment program:

1. An attendance application must be completed and submitted.
2. Enrollment is subject to the capacity limit established for the school and/or its grade levels.
3. On or before May 1, the parent or legal guardian will be notified in writing

whether the application has been accepted, rejected, or placed on a waiting list.

4. Transportation for the student may be the responsibility of the parent or legal guardian.

5. Providing false information on this form may result in the application being denied or admission being revoked.

The signatory affirms that the student will abide by the rules, standards, and policies of the school and the District if enrolled.

Signature of Parent or Legal Guardian Date

FOR DISTRICT USE ONLY , DO NOT WRITE BELOW THIS LINE

Student number _____ **Date stamp** _____
Filing Date

☐ Accepted ☐ Placed on waiting list Principal _____
Date

☐ Rejected - Reason for rejection _____

Copies sent by school to applicant and Superintendent's office.

Date sent _____

GLOBE UNIFIED SCHOOL DISTRICT #1



DOCUMENTATION OF COURT ORDERS

Date: _____

Student Name: _____

Grade: _____

Please check one of the following statements:

- ☐ There are no court orders or parental custody issues that apply to the student named above.
- ☐ I have provided a copy of all documented court orders, restraining orders, etc. that apply to the above named student.
- ☐ I have court orders, restraining orders, etc. that pertain to the student named above and realize that it is my responsibility to provide them to my child's school. Until such time, I am aware that both parents will be treated as custodial parents.

Parent Name (print) _____

Parent Signature _____

"Capturing Hearts, Empowering Minds"

Globe Unified School District
Questionnaire: Student/Family Residence

Your child may be eligible for additional educational services through Title I Part A, Title I Part C-Migrant, and/or Federal McKinney-Vento Assistance. Eligibility can be determined by completing this questionnaire.

1. Presently, are you and/or your family in any of the following situations? Check one box.						
<input type="checkbox"/> A. Staying in shelter, FEMA trailer, or waiting for foster care placement.						
<input type="checkbox"/> B. Sharing the housing of others due to loss of housing, economic hardship, similar reason; doubled-up.						
<input type="checkbox"/> D. Living in a car, park, campground, public space, abandoned building, substandard housing or similar.						
<input type="checkbox"/> E. Temporarily living in a motel or hotel due to loss of housing, economic hardship or similar reason.						
<input type="checkbox"/> U. Unknown nighttime residence.						
2. Unaccompanied Youth: not in the physical custody of a parent or guardian Check one box.						
<input type="checkbox"/> Y. Student(s) is with an adult that is not a parent or legal guardian, or alone without an adult.						
<input type="checkbox"/> N. Student does not meet the definition of "Unaccompanied youth".						
3. Have you moved in the past 3 years to seek work as a paid laborer in any type of farming (sod, dairy, chicken, vegetable, citrus, or other) or fishing? (Check one) Yes No						
<input type="checkbox"/> 1, 2 or 3 do not apply. STOP: If you checked this box, you do <u>not</u> need to complete the remainder of this form. Submit this form to school personnel.						
4. Student Name						
First	Middle	Last	M/F	D.O.B.	Grade	School Name

Print Parent/Guardian Name or Student (for unaccompanied homeless youth)	Signature	Date
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(Area Code) Phone number	Street Address	City	State	Zip
***** <u>School Use Only</u>				

School Advocate or Administrator: Based on the above information and a brief interview with this family, I attest that to the best of my knowledge they are eligible for benefits under the McKinney-Vento Act:

McKinney-Vento Liaison (Print)	Signature	Date
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**GLOBE UNIFIED SCHOOL DISTRICT #1
REQUEST FOR STUDENT EDUCATION RECORDS**

1ST Request _____ 2nd Request _____ Date _____

Student's Name: _____

Date of Birth _____ Age _____ Grade Level _____

Name of Previous School _____

School Address _____

School Phone Number _____ Fax Number _____

Please send the following information: (Please **DO NOT** send the cumulative folder.)

- Birth certificate, legal custody documentation
- Health/medical records
- General administrative data, attendance data
- Official transcript, report cards, test scores
- Withdrawal grades, formal withdrawal slip
- Discipline Records
- Arizona SAIS Number (if Applicable) _____
- IEP, speech and language evaluations, special education programs and records

Mail the above records to:

School Name: _____
Globe Unified School District #1
460 N. Willow Street
Globe, AZ 85501

A.R.S. 15-828.F Notwithstanding any financial debt owed by the pupil, any school requested to forward a copy of a transferring pupil's record to the new school shall comply and forward the record within ten days after receipt of the request.

NOTE: According to the Final Regulations (Family Educational Rights and Privacy Act, Buckley Amendment, June 17 1976), it is no longer necessary to obtain written consent to release records between schools. School officials may receive student records without written consent from the parent, guardian, or student.

Volunteers

Any person wishing to help at out in their child's or grandchild's classroom or school, attend a field trip, chaperone a school event, or assist with school sports is considered a school volunteer and must complete the following steps:

If you are a first time volunteer:

- a. Fill out an online application at www.globeschools.org under "Employment Opportunities" for the site you wish to volunteer.
- b. Upload a copy of your driver's license and social security card for background check.
- c. If your background check comes back clear, then go by District Office to get fingerprinted. Background checks can take up to 72 hours for results to be returned.
- d. You will have to wait until fingerprint results come back before you can start volunteering. Fingerprint results can take up to approximately 4 weeks to be returned especially at the beginning of the school year.

If you are a continuing volunteer:

- a. Fill out an online application at www.globeschools.org under "Employment Opportunities" for the site you wish to volunteer.
- b. Previous fingerprints are good for two years and background checks are good for three years.
- c. You will have to wait until fingerprint or background results come back before you can start volunteering. Background checks can take up to 72 hours for results to be returned. While fingerprint results can take up to approximately 4 weeks to be returned especially at the beginning of the school year.

Please contact the Human Resources Department at (928)402-6041 if you should have any questions.