



Pointe Schools

5940 W. Union Hills Dr., Ste. B-100, Glendale, AZ. 85308
602.843.2014 phone 602.843.2015 fax
www.pointeschools.org

Canyon Pointe Academy

4941 W. Union Hills Drive
Glendale, AZ 85308
Office 602.896.1166
Fax 602.896.1164

Pinnacle Pointe Academy

6753 W. Pinnacle Peak Rd
Glendale, AZ 85310
Office 623.537.3535
Fax 623.537.4433

North Pointe Prep

10215 N. 43rd Avenue
Phoenix, Arizona 85051
Office 623.209.0017
Fax 623.209.0021

Enrollment Information

In order to assist you in the enrollment process, the following items are necessary to complete your child's student file:

1. Pointe Schools Registration Form (two pages)
2. Arizona Department of Education Child Find Form
3. Arizona Department of Education Home Language Survey (English or Spanish)
4. Arizona Department of Education Race/Ethnicity Form
5. Arizona Department of Education Arizona Residency Documentation Form
6. Birth Certificate
7. Immunization Records
8. Academic Records (if applicable - unofficial transcript, most recent report card, etc)
9. Custody Papers (if applicable)

Once it has been determined that space is available for your child in accordance with ARS 15-184, you will be formally notified by the school.

In accordance with ARS 15-184§F, Pointe Schools reviews all discipline records to ensure student has not been expelled or is in the process of being expelled.

North Pointe Prep students must take a math placement test to be placed in the appropriate math course (math classes are determined by ability, not grade level).

Canyon Pointe and Pinnacle Pointe students must take the Math/Reading placement test to determine the appropriate placement for the Math and Reading blocks.

A child who has not turned five years old by September 1, 2012, must pass Pointe's Kindergarten Readiness Assessment and space must be available in order for him/her to be enrolled.



<h2 style="margin: 0;">2012-2013 STUDENT REGISTRATION FORM</h2>

Please indicate the Pointe School your child will be attending.

- Canyon Pointe Academy
 Pinnacle Pointe Academy
 North Pointe Preparatory

STUDENT INFORMATION

Last Name: _____		First Name: _____		Middle Name: _____	
Social Security #: _____			Preferred Name: _____		
Primary Address: _____			City: _____	State: _____	Zip: _____
Home Telephone: _____			Student E-mail: _____		
Date of Birth: _____	Gender: M F	Ethnicity: _____		Current Age: _____	
Place of Birth: _____			Home Language: _____		
Current School: _____				Current Grade: _____	
Requested Enrollment (Start) Date at Pointe School: _____				Enrollment Grade: _____	

PARENT/GUARDIAN INFORMATION

Father's Name: _____	Mother's Name: _____
<input type="checkbox"/> Lives With <input type="checkbox"/> Legal Custody <input type="checkbox"/> Receives Report Cards	<input type="checkbox"/> Lives With <input type="checkbox"/> Legal Custody <input type="checkbox"/> Receives Report Cards
Street Address: _____	Street Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Home: _____ Cell: _____	Home: _____ Cell: _____
E-Mail: _____	E-Mail: _____
Employer: _____	Employer: _____
Telephone: _____ Fax: _____	Telephone: _____ Fax: _____

Are parents divorced or separated?	Yes	No	
Name of Stepmother: _____		Name of Stepfather: _____	
Cell: _____	Work: _____	Cell: _____	Work: _____
E-Mail: _____		E-Mail: _____	
Siblings at a Pointe School ?	Yes/Current	Yes/Registered	No
Name: _____	Grade: _____	School: NPP CPA PPA	
Name: _____	Grade: _____	School: NPP CPA PPA	
Name: _____	Grade: _____	School: NPP CPA PPA	
Name: _____	Grade: _____	School: NPP CPA PPA	



EDUCATIONAL INFORMATION (page 2 of 2012-2013 Student Registration Form)

List previous school(s) (attach separate sheet if necessary):

School:			Telephone:			Fax:			
Address:					Dates Attended:				
City:			State:		Zip Code:		Grades Attended:		
Reason Leaving:									
School:			Telephone:			Fax:			
Address:					Dates Attended:				
City:			State:		Zip Code:		Grades Attended:		
Reason Left:									
School:			Telephone:			Fax:			
Address:					Dates Attended:				
City:			State:		Zip Code:		Grades Attended:		
Reason Left:									
School:			Telephone:			Fax:			
Address:					Dates Attended:				
City:			State:		Zip Code:		Grades Attended:		
Reason Left:									
Has your child been suspended/dismissed?			Yes	No	This academic year?		Yes	No	Year?
Has your child ever been expelled?			Yes	No	This academic year?		Yes	No	Year?

If you marked yes to either of the questions above, you must provide separate, official documentation detailing the circumstances surrounding the suspension/expulsion.

What are some of your child's Strengths _____ Interests _____ Challenges _____

How did you hear about us? Website Family/Friend Fliers/Mailers AZ Dept. of Ed
 Current Pointe Schools' Student/Employee/Parent (name): _____
 Other: _____

I certify that the above information is true and complete and I understand that falsification of facts on this application may result in my child's delay in enrollment and/or removal from the school. I also certify that I have read and agree to abide by the current Pointe Schools student handbook. Additionally, I agree to support and abide by each current student handbook as long as my child is enrolled at a Pointe School.

 Parent/Guardian Signature _____
 Date



2012-2013 SPECIAL EDUCATION INFORMATION FORM

Please indicate the Pointe School your child will be attending.

- Canyon Pointe Academy Pinnacle Pointe Academy North Pointe Preparatory

Student's Last Name: _____ First Name: _____ Middle: _____

Is your child currently receiving Special Education Services? Yes _____ No _____

Has your child ever received Special Education Services? Yes _____ No _____

Has your child ever been evaluated for Special Education Services? Yes _____ No _____

If you checked "NO" to all questions above, please skip the next section and sign the form at the bottom.

If you checked "YES" to any of the question above, please complete the form below. Pointe Schools is committed to providing all eligible students with services upon enrollment. *Therefore; in order for your registration to be complete, you must attach a current copy of your child's 504 plan or IEP and Psychological records (or the official determination that your child no longer qualifies for services).* Once the Special Education Director has reviewed the paperwork, he/she will call you to set up a meeting.

Age: _____ Grade in School: _____ Date/Grade of IEP (if possible): _____

Please read the categories below and check all that apply to your child:

___ Hearing Impaired (HI) ___ Current Behavior Plan ___ Visual Impairment

___ Emotional Disability (ED) ___ Speech/Language Impairment ___ MIMR

___ Orthopedic Impairment ___ 504 Plan ___ ELL

___ Attention Deficit Disorder ___ Occupational Therapy ___ Autism (A)

___ Specific Learning Disability (SLD) Other (Specify) _____

___ Math ___ Language ___ Reading

I understand that Pointe Schools requires a full disclosure of all special education services that have been provided. I also understand that failing to disclose this information is a falsification of facts and will result in my child being withdrawn from school.

Parent/Guardian Signature

Date



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.



RACE and ETHNICITY DATA COLLECTION FORM

In accordance with new federal guidance, schools are required to utilize a two-part question to collect data about race and ethnicity. Part 1 is in regards to Ethnicity and Part 2 relates to race. More than one race may now be selected on Part 2.

Date: _____ Child's Name: _____

Parent/Guardian Signature: _____

Race/Ethnicity Two-Part Question: Answer BOTH questions.

Part 1: Ethnicity

Is the student Hispanic or Latino? (Choose only one)

- No, not Hispanic or Latino
- Yes, Hispanic or Latino (A person of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.)

Part 2: Race

What is the student's race? (Regardless of how respondent answered the first question, choose one or more)

- American Indian or Alaska Native (A person having origins in any of the original tribal peoples of North and South America, including Central America, and who maintains affiliation or community attachment.)
- Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)
- Black or African American (A person having origins in any of the black racial groups of Africa.)
- Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
- White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)



**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 U.S. passport
- ___ 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 or other identification issued by a recognized Indian tribe that contains an Arizona address.
- ___ Documentation from a state, tribal or federal government agency (Social Security Administration, Veteran's Administration, Arizona Department of Economic Security)

- ___ 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



**State of Arizona
Affidavit of Shared Residence**

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, 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 U.S. passport
- 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 or other identification issued by a recognized Indian tribe.
- 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 _____.

Notary Public

My Commission Expires:
