

Administrative Use Only Intake Initial and Date Received

AmeriSchools Academy

Enrollment Form					
Please print-Information is required for eligibility.					
STUDENT INFORMATION	Enrolling for first time	Re-enrolling			
Admission for Grade Level	Today's Date				
Last Name	·	First Name			
Address					
Birth Date	Age	_			
Proof of Birth Document		State/Country of Birth _			
Provide a reliable proof of the stude	nts' identity and age - birth certifica	ate, baptismal certificate, an a	pplication for social security number or an		
affidavit explaining the inability to pro	ovide a copy of the birth certificate) .			
PROOF OF RESIDENCY					
Parent(s) or legal guardian(s) that m	naintains 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 sch	hool district, school site, or charter	school in which the student is	s being enrolled, and provide one of the		
following documents, which bear the	e parent or legal guardian's full nan	ne and residential address or	physical description of the property where		
the student resides (no P.O. Boxes)					
Please provide:					
* Valid Arizona driver's license, Ar	rizona identification card				
* Valid Arizona motor vehicle regis	stration				
* Valid Arizona Address Confident	tiality Program authorization card				
* Property deed/Mortgage docume	ents				
* Property tax bill					
* Rental agreement or lease (inclu	uding section 8 agreement or off-ba	ase military)			
* Utility bill (water, gas, cable, pho	one)				
* Bank or credit card statement					
* W-2 wage statement					
* Payroll stub					
PARENT IN MILITARY Yes	No				
Parent/Guardian Name		Email			
Home Phone		Cell Phone			
Parent/Guardian Signature(s):					
Name	Signature		Date		

Prior to attending AmeriSchools the REGISTRATION PACKET will need to be filled out and signed.

Administrative Use Only

Approval Signature:

Registration Packet Delivered:

Returned:

Complete:



Arizona Department of Education

Arizona Residency Documentation Form

Student_	School
School D	istrict or Charter Holder
Parent/Le	egal Guardian
submit i	arent/Legal Guardian of the Student, I attest* that I am a resident of the State of Arizona and n support of this attestation a copy of the following document that displays my name and al address or physical description of the property where the student resides:
Va Re	lid Arizona driver's license, Arizona identification card or motor vehicle registration lid Arizona Address Confidentiality Program authorization card al estate deed or mortgage documents
	perty tax bill sidential lease or rental agreement
	ter, electric, gas, cable, or phone bill
	nk or credit card statement
	2 wage statement
	vroll stub
Ce	rtificate of tribal enrollment (506 Form) or other identification issued by a recognized Indian se in Arizona
	cumentation from a state, tribal or federal government agency (Social Security Administration, teran's Administration, Arizona Department of Economic Security)
	mporary on-base billeting facility (for military families)
	nsular identification card issued by a foreign government as a valid form of identification if the eign government uses biometric verification techniques in issuing the consular identification d
ori	in currently unable to provide any of the foregoing documents. Therefore, I have provided an ginal affidavit signed and notarized by an Arizona resident who attests that I have established idence in Arizona with the person signing the affidavit.
Signatura	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) Consular identification card issued by a foreign government as a valid form of identification if the foreign government uses biometric verification techniques in issuing the consular identification card
Printed Name of Affiant:
Signature of Affiant:

Acknowledgement

State of Arizona County of		
The foregoing was acknowledged before me this By	day of	_, 20,
My Commission Expires:		
	Notary Public	