



Da Vinci Tree Academy

2018-2019 Registration Form

For complete registration of your child, please submit the following documents:

Documents included in this package:

- Commitment to Success (signed)
- 2018-2019 DaVTA Registration Packet (completed, signed, and dated)
- ESSA (also known as NCLB) Guidelines to Determine Eligible Students
- PHLOTE Form (completed, signed, and dated)
- Arizona Residency Documentation Form (completed, signed, and dated)
- iPad Pilot Parent Agreement/iPad Policy Manual

Other Required Documents:

- Arizona Residency Verification (only provide a copy of one)
 - Valid Arizona driver's license, Arizona identification card
 - Valid Arizona motor vehicle registration
 - Valid United States passport
 - Property deed
 - Mortgage documents
 - Property tax bill
 - Rental agreement or lease (including Section 8 agreement)
 - Utility bill (water, electric, gas, cable, phone)
 - Bank or credit card statement
 - W-2 wage statement
 - Payroll stub
 - Certificate of tribal enrollment or other identification issued by an Indian tribe
- Must also include only one of the following: Copy of Birth Certificate, Baptismal Record, Social Security Number Application or Original School Records
- Copy of Immunization Records
- Copy of previous report card and copies of standardized tests (AIMS Science & AzMerit)
- Legal Custody Documentation (if applicable)
- IEP (if applicable and after the student has been registered and enrolled)
- 504 (if applicable and after the student has been registered and enrolled)

OFFICE USE ONLY (Verify student name Per A.R.S 15-828)

Student Last Name: _____ Student First Name: _____ Packet

Received

By: _____ Date: _____ SAIS ID#:

_____ Grade Level: _____ ENTRY DATE _____

CODE _____ WITHDRAWAL DATE _____ CODE _____

Student Information

-As it appears on Birth Certificate-

Last: _____ First: _____ MI: _____

Home Address: _____ APT/Unit: _____

City: _____ State: _____ Zip: _____

Home Phone Number / Primary Contact Number: (_____) _____ - _____

Grade Entering: _____ Last School Attended: _____

Date of Birth (mm/dd/yyyy): _____ Present Age: _____

Country of Birth: _____

State/Province of Birth: _____

Gender: _____

Parent/Guardian Information

Parent Name: _____

Parent Name: _____

- Lives With
- Legal Custody
- Guardian/Foster Parent

- Lives With
- Legal Custody
- Guardian/Foster Parent

Order of Contact (circle): 1st 2nd 3rd

Order of Contact (circle): 1st 2nd 3rd

Address: _____

Address: _____

City: _____ State: _____

City: _____ State: _____

Zip: _____

Zip: _____

Mobile: (_____) _____ - _____

Mobile: (_____) _____ - _____

Work: (_____) _____ - _____

Work: (_____) _____ - _____

Email: _____

Email: _____

Primary Home Language Other than English (PHLOTE)

Questions used to determine if students will be assessed for English Language Proficiency and are in compliance with Arizona Administrative Code, R7-2-306(B)(1), (2)(a-c).

What is the primary language used in the home? _____

What is the language most often spoken by the student? _____

What is the first language the student acquired? _____

Other Siblings At Home

Name: _____ Grade: _____ Enrolled at DaVTA/Storybook? Y N

Name: _____ Grade: _____ Enrolled at DaVTA/Storybook? Y N

Name: _____ Grade: _____ Enrolled at DaVTA/Storybook? Y N

Name: _____ Grade: _____ Enrolled at DaVTA/Storybook? Y N

Student Demographics

We are required by the State of Arizona to report the following race and ethnicity information for all students.

Student's Race

Check all that apply. If two or more are checked, please circle the option you would like DaVTA to list on the state survey. Arizona only allows us to report one category per student.

- White
- Asian
- Black/African American
- Pacific Islander or Native Hawaiian
- American Indian/Alaskan Native

Student's Ethnicity

Check one box only.

- Hispanic or Latino
- Not Hispanic, Not Latino

Special Education Information

Students are admitted to Da Vinci Tree Academy regardless of whether or not they have an Individual Education Profile (IEP) or 504 plan. Once students are admitted, parents are required to complete a questionnaire that informs the school of any and all accommodations the student requires currently or in the past.

Is the student currently enrolled in programs such as Special Education, Gifted programs, Etc.?

Yes No

If yes, please state which and for what specific area(s): _____

Has the student previously been enrolled in Special Education, Gifted programs, Etc.?

Yes No

If yes, please explain: _____

Does the student have a serious or disabling condition that may require accommodation or evaluation for Special Education?

Yes No

If yes, please explain: _____

General Information

Has the student ever been expelled or been put in longterm suspension at previously attended schools?

Yes No

If yes, please explain: _____

Is the student currently under the supervision of the Juvenile Court for prior criminal activity?

Yes No

If yes, please explain: _____

How did you learn about Da Vinci Tree Academy?

Google Facebook Storybook Cottage Radio Kids First on 22nd
 Family/Friends GreatSchools.com Other: _____

My signature below certifies all of the following: (1.) I am the parent or Legal guardian of this student; (2) This student resides with me; (3) All information given above is correct to the best of my knowledge; (4) DaVTA has my permission to obtain school records from the previous schools attended.

Parent Guardian Signature: _____

Date: _____

Student Emergency Card

Last: _____ First: _____ MI: _____

Home Address: _____ APT/Unit: _____

City: _____ State: _____ Zip: _____

Home Phone Number / Primary Contact Number: (_____) _____ - _____

Parent/Guardian: _____

Mobile: (_____) _____ - _____

Work: (_____) _____ - _____

Parent/Guardian: _____

Mobile: (_____) _____ - _____

Work: (_____) _____ - _____

Physician: _____

Business Name: _____

Office: (_____) _____ - _____

Dentist: _____

Business Name: _____

Office: (_____) _____ - _____

Emergency Contact: _____

Phone: (_____) _____ - _____

Relationship: _____

Emergency Contact: _____

Phone: (_____) _____ - _____

Relationship: _____

Current Medications: _____

Allergies to Medications: _____

DaVTA will make every effort to contact the above-mentioned persons in the event of an emergency. I hereby authorize Da Vinci Tree Academy to obtain medical care in the event that an emergency occurs.

Parent/Guardian Signature

Date: _____

Parent/Guardian Signature

Date: _____

Medication Permission

I, _____, parent and/or guardian of _____, grant permission to DaVinci Tree Academy to administer Tylenol and/or Ibuprofen to my child not to exceed the recommended dosage.

Parent/Guardian Signature

Date

Arizona Department of Education Residency Documentation Form

Student: _____ **School:** Da Vinci Tree Academy K-8
School District or Charter Holder: Science Technology Engineering and Math Arizona

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:

Please mark and provide ONLY ONE:

- 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.

Parent/Guardian Signature

Date

Homeless Form

The following information is used to identify the needs of students and to report information to receive funding to improve our educational programs. If this information does not apply to you; please write your student's name, parent signature, and check the DOES NOT APPLY box.

DOES NOT APPLY

Student Name: _____ Parent/Guardian Signature: _____

Homeless Information: If you are homeless, please complete the following.

Type of housing (check options which apply):

Publicly Operated Shelter

Specify: _____

Privately Operated Shelter

Specify: _____

Temporary Housing with Relatives or Friends

Public Lands, Streets, Campgrounds

Other

Specify: _____

Children/Youth Information:

First Name	Last Name	Grade	Age	Sex	Ethnicity	Attend School?	School Name

PHOTOGRAPH RELEASE

I, _____, parent and/or guardian of _____, grant permission to DaVinci Tree Academy to allow my child to have his/her picture taken at school for the current 2018-2019 school year for the following events:

- Yearbook**
- School Newspaper**
- School Website**
- School Brochures and Promotional Materials**

Parent/Guardian Signature

Date

SCHOOL EXCURSIONS

I, _____, the parent and/or guardian of _____, hereby grant permission to DaVinci Tree Academy to allow my child to participate in school-sponsored excursions for the current 2018-2019 school year under the supervision of school personnel. I understand that permission slips will be sent home prior to each excursion to obtain my permission for transportation arrangements.

Parent/Guardian Signature

Date

SCHOOL DAILY TRANSPORTATION

I, the parent of _____, authorize DaVinci Tree Academy to release my child after school hours with the following condition:

With parents/guardians or authorized person (please list all authorized persons if any)

Name	Phone Number	Relationship

If your student has permission to walk home, or meet you outside the gates please mark the box and sign below.

Parent/Guardian Signature

Date

STUDENT INSURANCE INFORMATION

(Optional)

Please complete the bottom portion of this page and return to the office.

My student _____ has health insurance coverage through the following provider:_____.

Student's primary care physician name_____

Physician's phone #_____

Physician's office street address:

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: DaVinci Tree Academy

School: DaVinci Tree Academy

.....
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.

1535 West Jefferson Street, Phoenix, Arizona 85007 • 602-542-0753 • www.azed.gov/oelas

Migrant Agricultural Form

The following information is used to identify the needs of students and to report information to receive funding to improve our educational programs. If the information on this form applies to you please complete this form; if this information does not apply to you, please fill in your student's name, parent signature, and check the "Does Not Apply" box.

Parent/Guardian Signature

Student Signature

Does Not Apply

Migrant Agricultural Information

Student Name: _____ Grade: _____

Parent(s) Names: _____

Address: _____

City, State, ZIP: _____

Has your family moved in the last 3 three years to seek agricultural work?

Yes

No

Are you a dependent of an agricultural worker?

Yes

No

Annual Notification to Parents Regarding Confidentiality of Student Education Records

The Family Educational Rights and Privacy Act (FERPA) is a Federal law that protects the privacy of student education records. FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- Parents or eligible students have the right to inspect and review the student's education records maintained by the school within 45 days of a request made to the school administrator. Schools are not required to provide copies of records unless it is impossible for parents or eligible students to review the records without copies. Schools may charge a fee for copies.
- Parents or eligible students have the right to request in writing that a school correct records that they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth his or her view about the contested information.
- Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions:
 - School officials with legitimate educational interest
 - A school official is a person employed or contracted by the school to serve as an administrator, supervisor, teacher, or support staff member (including health staff, law enforcement personnel, attorney, auditor, or other similar roles); a person serving on the school board; or a parent or student serving on an official committee or assisting another school official in performing his or her tasks
 - A legitimate educational interest means the review of records is necessary to fulfill a professional responsibility for the school
 - Other schools to which a student is seeking to enroll
 - Specified officials for audit or evaluation purposes
 - Appropriate parties in connection with financial aid to a student
 - Organizations conducting certain studies for or on behalf of the school
 - Accrediting organizations
 - To comply with a judicial order or lawfully issued subpoena
 - Appropriate officials in cases of health and safety emergencies
 - State and local authorities, within a juvenile justice system, pursuant to specific State law.

Schools may disclose, without consent, "directory" information such as a student's name, address, telephone number, date and place of birth, honors and awards, sports participation (including height and weight of athletes) and dates of attendance unless notified by the parents or eligible student that the school is not to disclose the information without consent.

The Individuals with Disabilities Education Act (IDEA) is a federal law that protects the rights of students with disabilities. In addition to standard school records, for children with disabilities education records could include evaluation and testing materials, medical and health information, Individualized Education Programs and related notices and consents, progress reports, materials related to disciplinary actions, and mediation agreements. Such information is gathered from a number of sources, including the student's parents and staff of the school of attendance. Also, with parental permission, information may be gathered from additional pertinent sources, such as doctors and other health care providers. This information is collected to assure the child is identified, evaluated, and provided a Free Appropriate Public Education in accordance with state and federal special education laws.

Each agency participating under Part B of IDEA must assure that at all stages of gathering, storing, retaining and disclosing education records to third parties that it complies with the federal confidentiality laws. In addition, the destruction of any education records of a child with a disability must be in accordance with IDEA regulatory requirements.

For additional information or to file a complaint, you may call the federal government at (202) 260-3887 (voice) or 1-800-877-8339 (TDD) OR the Arizona Department of Education (ADE/ESS) at (602) 542-4013. Or you may contact:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue, SW
Washington, D.C. 20202-5901

Arizona Department of Education
Exceptional Student Services
1535 W. Jefferson, BIN 24
Phoenix, AZ 85007

This notice is available in English and Spanish on the ADE website at www.ade.az.gov/ess/resources under forms. For assistance in obtaining this notice in other languages, contact the ADE/ESS at the above phone/address.

Commitment to Success

Da Vinci Tree Academy (DaVTA) is dedicated to inspiring students in the areas of Science, Technology, Engineering, and Math (STEM) while highlighting how these fields intersect with the Liberal Arts. Students can't fully benefit from these areas until they have a strong set of literacy skills and a healthy work ethic. That is why we require all of our students and parents/guardians to sign the following commitment to success.

Student Commitment to Success

- I commit to do my best by paying attention in class and completing my homework.
- I commit to respect my teachers and the other adults at school.
- I commit to let my teachers know if I don't understand something or if I need help.
- I commit to follow school rules and teacher instructions, since I know that they are there to keep me safe and to help me learn.

Student Signature

Date

Parent/Guardian Commitment to Success

- I commit to setting my student up for success by keeping an open line of communication with my child's teachers when necessary, either in-person or over the phone.
- I commit to helping my student complete their homework by providing them with a quiet work space at home and/or allowing them to stay after school for study hall.
- I commit to respecting the staff of Da Vinci Tree Academy and to addressing my questions and concerns to my child's teachers and/or school administration.
- I commit to helping my child follow school rules by providing them with dress code appropriate clothing. If I am unable to do so, I will privately let the school administration know so that arrangements can be made.

Parent/Guardian Signature

Date