

Shonto Preparatory Technology High School

ENROLLMENT



Thank you for your interest in Shonto Preparatory Technology High School. Below is a checklist to assist you with the application and required forms submission process. Complete all forms listed below **after you have submitted your Enrollment Application** and have been admitted to the school. Please submit all required documents (other than the Enrollment Application) at one time. Any residential enrollments must have prior approval at Shonto Preparatory Technology High School before enrolling in the program.

Required Forms and/or Documents

- ☐ Enrollment Application (Paper Form)
Application must be complete, signed and dated. Do not resend if you have already submitted an application
- ☐ Form A: Arizona Department of Education – Arizona Residency Documentation Form
Form must be complete, signed and dated
- ☐ Form B: State of Arizona – Affidavit of Shared Residence
- ☐ Proof of Arizona Residency - *Provide a copy of proof of residency (utility bill, etc)*
- ☐ Form C: Location of Residency – *draw map of home location*

NOTE: Form A (Proof of Arizona Residency) is included in the Student Enrollment Application. The forms listed above are required to complete the registration process.

Shonto Preparatory Technology High School Enrollment Contact

Marion Calamity, HS Administrative Assistant/Registrar
PO Box 7900, Shonto, AZ 86054

Phone: 928-672-3500 opt#2 Fax: 928-672-3504 Email: mcalamity@shontoprep.org

Student Enrollment Application

Please use a Black or Blue ink

ENROLLMENT INFORMATION

Returning Student? Yes No

New Student? Yes No

Grade _____

Previous School Attended:

School Name _____ Date Withdrawn _____

Address _____ Phone Number _____

STUDENT INFORMATION

Student Name: _____ School ID# _____

 Last First Middle

Birth Date: _____ Gender: Male Female

Status: Walker Bus Rider Dorm

Mailing Address: _____

Home/Cell Phone: _____ Alternate Contact Phone: _____

FAMILY INFORMATION

(If there is a divorce, separation, or guardianship, please provide documentation)

Last Name	First Name	Lives with	Custody	Place of Employment	Work Phone
Mother:					
Father:					
Legal Guardian:					

Parent(s)/Guardian(s) email address: _____

EMERGENCY CONTACT

1st contact

2nd Contact

Name _____

Name _____

Phone # _____

Phone # _____

Relationship _____

Relationship _____

SIBLING INFORMATION

Please list all siblings in the household that attend Shonto Preparatory Schools:

- | | | | |
|---------------|-------------|---------------|-------------|
| 1. Name _____ | Grade _____ | 4. Name _____ | Grade _____ |
| 2. Name _____ | Grade _____ | 5. Name _____ | Grade _____ |
| 3. Name _____ | Grade _____ | 6. Name _____ | Grade _____ |

STUDENT CHECKOUT RELEASE DATA

I AUTHORIZE THE FOLLOWING PERSON/PEOPLE TO CHECK OUT MY CHILD FROM SCHOOL. The people on this list must be over 18 years old; school personnel may ask to see an ID card. Phone calls and notes will not be accepted as authorization. Any release of a student requires proper check out procedures in the office. This policy is written in the Student Handbook.

- | | |
|---------------|--------------------|
| 1. Name _____ | Relationship _____ |
| 2. Name _____ | Relationship _____ |
| 3. Name _____ | Relationship _____ |
| 4. Name _____ | Relationship _____ |

The following persons/people **ARE NOT** allowed to pick up my child from school at any time.

- | | |
|---------------|--------------------|
| 1. Name _____ | Relationship _____ |
| 2. Name _____ | Relationship _____ |

MILITARY STUDENT IDENTIFIER (MSI) DATA COLLECTION SURVEY

This form is required¹ by the Arizona Department of Education. Please fill out the following form, sign and return to the school.

- ☐ Student is a dependent of a member of the Army, Navy, Air Force, Marine Corps or Coast Guard on Active Duty
- ☐ Student is a dependent of a member of the Arizona National Guard (Army, Air Guard or State Guard)
- ☐ Student is a dependent of a member of a reserve force in the United States military (Army, Navy, Air Force, Marine Corps or Coast Guard)
- ☐ None of the above

¹Shonto Preparatory Technology High School will not deny enrollment if a parent chooses to withhold this information. This item will not be used in the enrollment decision-making process.

I am legally responsible for this student and hereby apply for their admission to Shonto Preparatory Technology High School. Therefore, I certify that the foregoing information is accurate and complete to the best of my knowledge. I also understand that additional information may be requested by the school from me and other public agencies in accordance with the rules and regulations or the Family Privacy Act to complete the enrollment of my child.

Parent/Guardian Signature

Date

Registrar

Date

Principal

Date

☐ New Enrollment

☐ Returning

☐ Approved

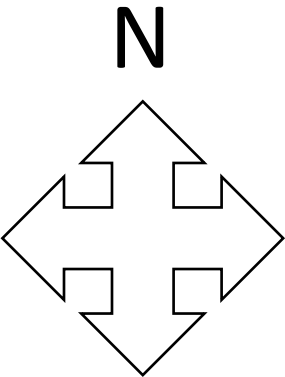
☐ Approved with Contract

☐ Denied

LOCATION OF RESIDENCY

In the space provided, please indicate the location of your home.

Description of Home and its location



REQUEST FOR RECORDS



Date: _____

I hereby authorize Shonto Preparatory Technology High School to access the cumulative school records and special educational records of:

Student's Full Name Date of Birth Entering Grade

Previous School:

School Name: _____

Mailing Address: _____

Phone: _____ Fax: _____

I hereby authorize the release of my child's school records to Shonto Preparatory School:

Signature Relationship Date

(34 CFR § 99.31) The Federal Family Education Rights and Privacy Act (FERPA) states that the written consent of the parent/guardian/eligible student is not required to release education records to officials of other schools or school system in which the student seeks or intends to enroll.

Bottom portion FOR OFFICE USE ONLY

Please send the following information for admissions:

- ☐ Withdrawal Form
- ☐ Transcripts of Grades
- ☐ Attendance Records
- ☐ Discipline Records
- ☐ Standardized State Assessment Scores
- ☐ Proof of Physical Address

- ☐ Copy of Certificate of Indian Blood
- ☐ Copy of Birth Certificate
- ☐ Copy of Immunization/Health Records
- ☐ Special Education Records and/or IEPs (If Applicable). **Please make to the attention of our Exceptional Student Services.**

Additional comments/requests

Please mail or email records to:

Mail:

Shonto Preparatory Technology High School
ATTN: M. Calamity, Administrative Assistant/Registrar
P.O. Box 7900
Shonto, AZ 86054

Email:

mcalamity@shontoprep.org