



# Madison School District Pre-Registration Form

Enrollment Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(mm) (dd) (yyyy)

School Year 20\_\_\_\_/20\_\_\_\_

## Student Information

Student Name: \_\_\_\_\_, \_\_\_\_\_  
(Last) (First) (MI)

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Open Enrollment:  Yes  No

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade Level: \_\_\_\_\_ Gender:  Male  Female

## Parent/Guardian Information

*(Provide information for at least one Parent/Guardian)*

Mother/Guardian Name \_\_\_\_\_, \_\_\_\_\_  
(Last) (First)

Father/Guardian Name \_\_\_\_\_, \_\_\_\_\_  
(Last) (First)

Primary Contact Phone Number (\_\_\_\_) - \_\_\_\_\_  Mother/Guardian  Father/Guardian  
xxx xxx-xxxx

Primary Email Address \_\_\_\_\_  Mother/Guardian  Father/Guardian  
[email@domain.com](mailto:email@domain.com)

## Previous School Information

Does your child participate or been tested for any of the following programs?

IEP  504 Plan  ELL  Gifted

Has your child previously attended an Arizona?  Yes  No

Has your child been retained?  Yes  No

Is your child currently suspended from another school?  Yes  No

Last School Attended: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Address, City & State \_\_\_\_\_

## Home Language

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? \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Signature affirms the information above is accurate and complete.*

### Madison School District Enrollment Checklist

<input type="checkbox"/> Birth Certificate
<input type="checkbox"/> AZ Residency Form/Proof of Address
<input type="checkbox"/> Custody Paperwork
<input type="checkbox"/> Immunization Records
<input type="checkbox"/> Open Enrollment Form

<input type="checkbox"/> Records Request Form
<input type="checkbox"/> Withdrawal Form – Previous School data
<input type="checkbox"/> Yellow Emergency Card
<input type="checkbox"/> Home Language Survey
<input type="checkbox"/> 45 Day Screening form

#### AzEDS Information

Student Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_ FTE: \_\_\_\_\_  
UID: \_\_\_\_\_ School Student Number: \_\_\_\_\_ Tuition Payer Code: 1 (State Funded)  
Enrollment Type: Main Special Enrollment Code: None or Open Enrollment

Entry Date:	Entry Code:	PowerSchool Entry Date:	Enrolled By: <i>initials</i>
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Previous School State: \_\_\_\_\_ Previous School CTDS: \_\_\_\_\_

Withdrawal Date:	Exit Code:	PowerSchool Exit Date:	Withdrawn By: <i>initials</i>
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#### Records Reviewed By:

Date:	Name:	Reason:



# Release of School Records

For students transferring to Madison

I hereby authorize (**PREVIOUS SCHOOL**) \_\_\_\_\_ to release information to the Madison Elementary School District. It is understood that this information will be used in a confidential and professional manner in the best interest of the child.

Information to be sent includes:

- Academic, Attendance, and Severe Discipline Information
- Psychological Records (Current Psych and Current IEP)
- Medical Records (Immunization Record)
- Other Records pertaining to the student

Name of Child: \_\_\_\_\_

Birth date: \_\_\_\_\_ Grade last attended at previous school: \_\_\_\_\_

Address of child: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Previous School Name: \_\_\_\_\_

Previous School Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Previous School Street Address or District: \_\_\_\_\_

Previous School State: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Printed name: \_\_\_\_\_

**Mail or fax records to:** (Parents: please circle the school to which you want records sent)

**Madison No. 1**  
5525 N. 16th Street  
Phoenix, AZ 85016  
602.664.7100  
602.664.7199 (fax)

**Madison Rose Lane**  
1155 E. Rose Lane  
Phoenix, AZ 85014  
602.664.7400  
602.664.7499 (fax)

**Madison Heights**  
7150 N. 22nd Street  
Phoenix, AZ 85020  
602.664.7800  
602.664.7899 (fax)

**Madison Camelview**  
2002 E. Campbell Avenue  
Phoenix, AZ 85016  
602.664.7200  
602.664.7299 (fax)

**Madison Park**  
1431 E. Campbell Avenue  
Phoenix 85014  
602.664.7500  
602.664.7599 (fax)

**Madison Traditional Academy**  
925 E. Maryland Avenue  
Phoenix, AZ 85014  
602.745.4000  
602.745.4099 (fax)

**Madison Simis**  
7302 N. 10th Street  
Phoenix, AZ 85020  
602.664.7300  
602.664.7399 (fax)

**Madison Meadows**  
225 W. Ocotillo Road  
Phoenix, AZ 85013  
602.664.7600  
602.664.7699 (fax)

**Madison District Office**  
5601 N. 16<sup>th</sup> Street  
Phoenix, AZ 85016  
602.664.7900  
602.664.7999 (fax)

Parents: You may provide this form directly to your child's former school or submit with enrollment information and Madison will collect the records.



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

Student \_\_\_\_\_ School \_\_\_\_\_

School District \_\_\_\_\_

Parent/Legal Guardian \_\_\_\_\_

Legal Residence Address \_\_\_\_\_

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
- 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

\*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.



**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:

Name: \_\_\_\_\_

Persons who reside with me: \_\_\_\_\_

Legal Residence Address: \_\_\_\_\_

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
- 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)

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: \_\_\_\_\_



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 \_\_\_\_\_

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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 Federal guidelines, a two-part question must be used to collect data about student race and ethnicity. The first part of the question is on ethnicity and the second is on race. The race question can have multiple values.

Student Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Parent/ Guardian Signature: \_\_\_\_\_

### **Race/Ethnicity Two-Part Question: Please answer BOTH questions.**

The order of the questions is important. The ethnicity question must be asked first, and both questions must be answered.

#### **Part 1: Ethnicity      Is this 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.)  
Tribal Name \_\_\_\_\_
- 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.)