



Thank you for your interest in Desert Star Community School. Our open enrollment for the school year 2023-24 begins on February 21st. Applications are accepted on or after the date via mail, email, fax or in person.

Applications will be reviewed in the order they are received. The date and time will be written on the registration form once it is verified to be a complete packet.

A packet is considered complete when the following components are met:

All sections of the registration packet must be filled out completely

- Entire Registration Form including:
 - Birth Certificate (ARS) 15-828:
 - A certified copy of the pupil's birth certificate.
 - Other reliable proof of the pupil's identity and age, including the pupil's baptismal certificate, an application for a social security number or original school registration records and an affidavit explaining the inability to provide a copy of the birth certificate.
 - A letter from the authorized representative of an agency having custody of the pupil pursuant to title 8, chapter 2 certifying that the pupil has been placed in the custody of the agency as prescribed by law.
 - Copy of immunization records or exemption form (given upon request)
 - Arizona Revised Statutes (ARS) 15-872 (B) states that "a pupil shall not be allowed to attend school without submitting documentary proof to the school administration unless the pupil is exempted from immunizations pursuant to section 15-873" with exemption on file.
- Ethnicity/Race/Military Identifier Form
- McKinney-Vento form
- Records Request form (only for grades 1-8)
- Arizona Residency Documentation form- **MUST** have a copy of the support documentation checked on the form attached
- Home Language Survey
- Guidelines to Determine Eligibility

If you are enrolling your child into Kindergarten they MUST be 5 years old by September 1st. We will not make any exceptions.

In March, the awarding of spaces begins and continues through the summer. You will receive a letter once a space has been reserved for your child. Some additional spaces become available at the beginning of the school year when the plans of families of enrolled students unexpectedly change.

Students are positioned by priority levels.

1. Current enrolled students.
2. Applicants with currently enrolled siblings.
3. Applicants will be put on a waiting list on a first come basis.

We look forward to you joining our community. If you have any questions or concerns please contact the office at 928-282-0171.

Sincerely,

Cheryl LeBlanc
Administrative Director



1240 South Recycler Rd. • Cornville AZ • 86325 • email: info@desertstarschool.org
web: desertstarschool.org • phone: 928 282-0171 • fax: 928 284-9565

2023-2024 Registration Form

Office Use Only:

Date/Time Received: _____ Staff Initials: _____ System Integration Date: _____

Student Name: _____ Entering Grade: _____
First Last

Gender Male Female Last School Attended: _____ Grades attended: _____

Date of Birth: _____ Birth City: _____ Birth State: _____

Does this student have a current:

Individualized Education Program (IEP)? Yes No

504 Plan? Yes No

Has this student received any of the following services in the past 12 months?

Tutoring Math or Reading

Speech/Language Services

Occupation Therapy

Special Education

Counseling

Parent or Guardian 1: Mother Father Stepmother Stepfather Other –

Specify _____

Does this parent have legal custody? Yes No Joint

Does the student live with parent? Yes No

Name: _____

Cell Phone: _____

Email _____

Home Phone: _____

Mailing Address: _____

Other Phone: _____

Residence Address (if different)



2023-2024 Registration Form (pg 2)

Parent or Guardian 2: Mother Father Stepmother Stepfather Other – Specify

Does this parent have legal custody? Yes No Joint

Does the student live with parent? Yes No

Name: _____	Cell Phone: _____
Email _____	Home Phone: _____
Mailing Address: _____	Other Phone: _____
Residence Address (if different) _____	



**Ethnicity/Race Data collection Form and Military Identifier
(Required by Federal Regulations)**

Part I - Is this student of Hispanic/Latino heritage? (Choose only one)

Yes, Hispanic/Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

No, not Hispanic/Latino

The above question is about *ethnicity*, not race. If you have chosen "NO" from above, please continue to answer the following by checking one or more options to indicate what you consider your student's race to be.

Part II - Race (Choose one or more)

American Indian or Alaska Native (A person having origins in the original peoples of North and South America, including Central America, and who maintains tribal affiliation or community attachment.)

Asian (A person having origins in 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 the black racial groups of Africa.)

Native Hawaiian or Other Pacific Islander (A person having origins in the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)

White (A person having origins in the original peoples of Europe, The Middle East or North Africa)

Military Student Identifier

Under the Every Student Succeeds Act, school districts have been issued guidelines regarding the collection of a student's military identifier. Districts are now required to collect and report a student's Military Identifier which identifies students with a parent or legal guardian who is an active member of the Armed Forces or National Guard.

Check the option that best describes the student's Military Student Identifier status at any point during the school year. If a parent(s)/legal guardian's status changes, please notify your child's school office.

Student is a dependent of a member of the Active Duty Forces (Army, Navy, Air Force, Marine Corps or Coast Guard)

Student is a dependent of a member of the National Guard (Army National guard or Air National Guard)

Not Applicable

Parent Signature

Date



McKinney-Vento Act - Student Residency Questionnaire 2023-2024

THIS MUST BE COMPLETED by all parents and/or unaccompanied youth. The information provided on this form can assist your campus in identifying students who are living in transitional housing or are highly mobile as defined by the McKinney-Vento Act. The answers to this residency information can help determine the services your child may be eligible to receive as defined at the bottom of this questionnaire.

• SECTION A:

Grade Level: _____ Age: _____ Male Female

Name of Student: Last: _____ First: _____ Middle: _____

Last School Attended: _____ City: _____ State: _____

• SECTION B:

1. Is your current address a temporary living arrangement? YES NO
2. Is this temporary living arrangement due to loss of housing or economic hardship? YES NO

IF YOU ANSWERED "NO" TO QUESTIONS 1 & 2, SKIP TO SECTION C

3. Is there a legal guardian or parent in the household for this child? YES NO
4. Where is the student presently living? (Check one)
 In a motel
 In a transitional housing or shelter
 Moving from place to place
 With more than one family in a dwelling
 In a place not designed for ordinary sleeping accommodations such as a car, park or campsite.

Current Address of Student: _____ Zip: _____ Phone: _____

• SECTION C:

Parent/Legal Guardian Signature: _____ Date: _____

At this time is your family in need of assistance in any of the following areas?

- School Records
 Immunization or health records
 School supplies or clothing
 After-school programs
 Preschool/Headstart programs

Homeless Liaison – Administrative Director Cheryl LeBlanc at 928-282-0171



Request for Records - (Only complete if enrolling in Grades 1-8)

Student Name: _____

Anticipated start date at Desert Star: _____

Student's last school of attendance:

School name: _____

Address: _____

Phone: _____

Fax: _____

Grades Attended: _____

I hereby request and authorize you to release the following:

- Transcripts
- Withdrawal form
- State Testng Results
- Attendance records
- Immunization records/Health records
- Birth certificate
- Discipline records
- Gifted and talented records
- SPED records
- Other _____

Pursuant to the Family Educational Rights and Privacy Act (FERPA) of 1974, all psychological or confidential data will be maintained as such. It will not be transferred to any person or agency without parental permission. Parents will have access to all student records.

Parent Signature

Date

Requested by

Official title



Arizona Department of Education Arizona Residency Documentation Form

Student _____ School _____

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 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, Veterans Administration, Arizona Department of Economic Security)
- Temporary on-base billeting facility (for military families)
- 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



Arizona Department of Education
Office of English Language Acquisition Services
Home Language Survey

The responses to this Home Language Survey (HLS) are used by the school to provide the most appropriate instructional programs and services for the student. **The answers below will determine if a student will take the Arizona English Language Learner Assessment (AZELLA).** Please respond to each of the three questions as accurately as possible. If you need to correct any of your responses, this must be done **before** the student takes the AZELLA Placement Test.

1. What language do people speak in the home *most* of the time?

2. What language does the student speak *most* of the time?

3. What language did the student first speak or understand?

Student Name: _____ District Student ID: _____

Date of Birth: _____ SSID: _____

Parent/Guardian Signature: _____

Date: _____

District or Charter School: Desert Star Community School

School: Desert Star Community School