



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_____

Please provide a copy of the Home Language Survey to the EL Coordinator/Main Contact on site.

In AzEDS, please enter all three HLS responses.

These HLS questions are in compliance with Arizona Administrative Code (R7-2-306(B)(1),(2)(a-c). (Revised 05-2023)

ED 506 Form
Indian Student Eligibility Certification Form for Title VI Indian Education Formula Grant Program

Parent/Guardian: This form serves as the official record of the eligibility determination for each individual child included in the student count for the Title VI Indian Education Formula Grant Program. If you choose to submit a form, your child could be counted for funding under the program. The grantee receives the grant funds based on the number of eligible forms counted during the established count period. You are not required to complete or submit this form unless you wish for your child(ren) to be included in the Indian student count. This form should be kept on file with the grant applicant and will not need to be completed every year. Where applicable, the information contained in this form may be released with your prior written consent or the prior written consent of an eligible student (aged 18 or over), or if otherwise authorized by law, if doing so would be permissible under the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g, and any applicable state or local confidentiality requirements.

Student Information

Name of the Child _____ Date of Birth _____ Grade level _____

Name of School _____ School District _____

Tribal Membership

The individual with Tribal membership is the (select only one): ____child ____child's parent ____child's grandparent

If the individual with Tribal membership is **not** the child listed above, name the individual (parent/grandparent) with tribal membership: _____

Name and address of Tribe or Band that maintains updated and accurate membership data for the individual listed above:

Name _____ Address _____

City _____ State _____ Zip Code _____

The Tribe or Band is (select only one):

- ☐ Federally Recognized Tribe
- ☐ State Recognized Tribe
- ☐ Terminated Tribe
- ☐ Alaska Native
- ☐ Member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994.

Proof of membership in Tribe or Band listed above, as defined by Tribe or Band is:

- ☐ Membership or enrollment number establishing membership (if readily available) or
- ☐ Other evidence establishing membership in the Tribe listed above (describe and attach)

Membership or enrollment number establishing membership (if readily available) or other evidence establishing membership in the Tribe listed above (describe and attach). _____

Attestation Statement

I verify that the information provided above is true and correct to the best of my knowledge and belief.

Printed Name of Parent/Guardian _____ Signature _____

Address _____ City _____ State _____ Zip Code _____

Phone Number _____ Email _____ Date _____

For Parent/Guardians:

Definitions:

Indian means an individual who is (1) A member of an Indian Tribe or Band, as membership is defined by the Indian Tribe or Band, including any Tribe or Band terminated since 1940, and any Tribe or Band recognized by the State in which the Tribe or Band resides; (2) A descendant of a parent or grandparent who meets the requirements described in paragraph (1) of this definition; (3) Considered by the Secretary of the Interior to be an Indian for any purpose; (4) An Eskimo, Aleut, or other Alaska Native; or (5) A member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect on October 19, 1994.

Student Information: Write the name of the child, date of birth, grade level, name of school and school district. Only name one child per form.

Tribal Membership: Write the name of the individual with the tribal membership, if it is not the child listed. Only one name is needed for this section, even though multiple persons may have tribal membership. Select only one identifier: the child, child's parent or grandparent, for whom you can provide membership information.

Write the name and address of the organization that maintains updated and accurate membership data for such Tribe or Band of Indians. The name does not need to be the official name as it appears exactly on the Department of Interior's list of federally recognized Tribes, but the name must be recognizable and be of sufficient detail to permit verification of the eligibility of the Tribe. Check only one box indicated whether it is a Federally Recognized, State Recognized, Terminated Tribe or Organized Indian Group. Write the enrollment number establishing the membership for the child, parent or grandparent, if readily available, or other evidence of membership.

Attestation Statement: Provide the printed name of parent/guardian and signature, address, phone number and email of the parent or guardian of the child. The signature of the parent or guardian of the child verifies the accuracy of the information supplied.

Paperwork Burden Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1810-0021. The time required to complete this portion of the information collection per type of respondent is estimated to average: 15 minutes per Indian student certification (ED 506) form; including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, D.C. 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: Office of Indian Education, U.S. Department of Education, 400 Maryland Avenue, S.W., LBJ/Room 3W238, Washington, D.C. 20202-6335



Arizona Department of Education
Arizona Residency Guidelines
REVISED 11/08/2021

Disclaimer: The Arizona Department of Education is providing these guidelines as technical assistance to the field. These guidelines are how the Arizona Department of Education interprets the below statutes and are not binding nor is it legal advice. If you have any legal questions, please consult an attorney.

INTRODUCTION

Local educational agencies are required to provide all children who reside within the school district with equal access to public education at the elementary and secondary level. The U.S. Supreme Court held in *Plyer v. Doe*, 457 U.S. 202 (1982), that the undocumented or non-citizen status of a student (or his or her parent/guardian) is irrelevant to that student's entitlement to an elementary and secondary public education. However, pursuant to A.R.S. § 15-823, a school district or charter school may not include non-Arizona-resident pupils in their student count and may not obtain state aid for those pupils.

In Arizona, the "district of residence" of a student is determined by the residency of the parent or guardian with whom the student lives. In some cases, the district of residence may also be determined by the residency of a relative who is seeking legal guardianship or custody of a student. A.R.S. § 15-821(D). In addition, if a school district governing board determines that a student's "physical, mental, moral or emotional health is best served by placement with a grandparent, brother, sister, stepbrother, stepsister, aunt or uncle who is a resident within the school district," and the placement with that relative is not "solely for the purpose of obtaining an education in this state without payment of tuition," the student is considered a resident of the district. A.R.S. § 15-823(C).¹

Accordingly, it is the responsibility of the school districts and charter schools that receive state aid to ensure that student/parent residency information is accurate and verifiable. **While a district may restrict attendance to district residents based on available classroom space,² inquiring into students' citizenship or immigration status, or that of their parents or guardians, is not relevant to establishing residency within the district. A school district or charter school may not bar a student from enrolling because he or she lacks a birth certificate or has records indicating a foreign place of birth, such as a foreign birth certificate.³**

The Arizona Department of Education may audit schools to ensure that only Arizona resident students are reported for state aid. Any school district or charter school that cannot demonstrate the accuracy of any student's residency through documents provided by the parent/guardian may be required to repay the state aid received for that

¹ See also *Martinez v. Bynum*, 461 U.S. 321 (1983).

² Pursuant to A.R.S. § 15-816 and A.R.S. § 15-816.01, Arizona's mandatory open enrollment policies allow a student to apply for admission and transfer to any public school of his or her choice, based on available classroom space, even if it is outside of the student's district of residence. There are two basic types of open enrollment policies: 1) Intra-district: Students transfer to another school within the resident school district, or 2) Inter-district: Students transfer to a school outside of their resident district.

³ For more information, please read <https://www2.ed.gov/about/offices/list/ocr/letters/colleague-201405.pdf>.

student. The following are examples of verifiable documentation parents may provide to demonstrate that they reside in a district.

VERIFIABLE DOCUMENTATION

A.R.S. § 15-802(B) requires school districts and charter schools to obtain and maintain verifiable documentation of Arizona residency upon enrollment in an Arizona public school. This document is designed to assist school districts and charter schools in meeting the legal requirements of the statute.

The documentation required by A.R.S. § 15-802 **must be provided at initial enrollment of a student in a school district or charter school in this state and reaffirmed, although not necessarily recollected, during the district or charter's annual registration process. This process will vary by the school, school district, or charter school (i.e. an annual form asking parents to confirm address).**

Every school district or charter school is required,⁴ within 30 days of enrollment, to obtain a certified copy of a pupil's birth certificate or other reliable proof of the pupil's identity and age,⁵ or 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. A school district or charter school MAY seek photo identification from the person enrolling a student to ensure that the adult is entitled to enroll the student in school, as long such a requirement does NOT unlawfully bar a student from enrolling in school.⁶

In case of an ADE Audit, the school, school district or charter school will be asked what process is used and what documentation is obtained via this process. If the student's residence has not changed, an affirmation (via a checkbox) that the previously provided proof of residency remains accurate should be sufficient. The documentation supporting Arizona residency should be maintained according to the school's records retention schedule.

For members of the armed services, a school may enroll a student if the parent provides a hard-copy or electronic document of their transfer or pending transfer to a military installation within the state. The parent must provide official documentation of residency within ten days after the arrival date which may include a temporary on-base billeting facility as their address. **PROOF OF RESIDENCY IS NOT REQUIRED FOR HOMELESS STUDENTS.⁷** 42 U.S.C. § 11 432(g)(3)(C)(i).

In general, students will fall into one of two groups: (1) those whose parent or legal guardian is able to provide documentation bearing his or her name and address; and (2) those whose parent or legal guardian cannot document his or her own residence because of extenuating circumstances including, but not limited to, that the family's household is multi-generational. Different documentation is required for each circumstance.

- 1. Parent(s) or legal guardian(s) that maintains 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 school district, school site, or

⁴ A.R.S. §15-828.

⁵ Other proof of the pupil's identity/age includes: pupil's baptismal certificate, an application for social security number or original school registration records and an affidavit explaining inability to provide a copy of the birth certificate, A.R.S. § 15-828 (A)(1)-(3).

⁶ For more information, please read U.S. DOJ Civil Rights Division "Fact Sheet: Information on the Rights of All Children to Enroll in School", <https://www.justice.gov/sites/default/files/crt/legacy/2014/05/08/plylerfact.pdf>.

⁷ Per A.R.S. §15-824 (C), "Homeless student" means a pupil who has a primary residence that is: (1) A supervised publicly or privately operated shelter designed to provide temporary living accommodations; (2) An institution that provides a temporary residence for individuals intended to be institutionalized or; (3) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

charter school in which the student is being enrolled, and provide **one** of the following documents, which bear the parent or legal guardian's full name and residential address or physical description of the property where the student resides (no P.O. Boxes):

- Valid Arizona driver's license, Arizona identification card
- Valid Arizona motor vehicle registration
- Valid Arizona Address Confidentiality Program authorization card
- Property deed/Mortgage documents
- Property tax bill
- Rental agreement or lease (including Section 8 agreement or off-base military housing)
- Utility bill (water, electric, gas, cable, phone)
- 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 located in Arizona
- Other documentation from a state, tribal, or federal agency (Social Security Administration, Veterans' Administration, Arizona Department of Economic Security, etc.)
- Temporary on-base billeting facility (for military families)
- Under A.R.S. § 41-5001(A), school districts and charter schools must accept consular identification cards that are 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.⁸

*A model Arizona Residency Documentation Form is available for schools at the end of this document.

2. **Parent(s) or legal guardian(s) that does not maintain his or her own residence:** The parent or legal guardian must have an **affidavit of shared residency** form completed indicating his or her name, the name of the school district, school site, or charter school in which the student is being enrolled, and submit a signed, notarized affidavit for the person who maintains the residence where the student lives attesting to the fact that the student resides at that address, along with a document from the bulleted list bearing the name and address of the person who maintains the residence.

*A model Affidavit of Shared Residence form is available for schools at the end of this document.

USE OF AND RETENTION OF DOCUMENTS BY SCHOOLS

School officials must **retain a copy** of the attestations or affidavits and copies of any supporting documentation presented for each student (photocopies acceptable) that school officials believe establish validity. Documents presented may be different in each circumstance, and unique to the living situation of the student. Documents retained by the school district or charter school may be used as an indication of residency; however, documentation is subject to audit by the Department.

Personally identifiable information other than name and address (SSN, account numbers, etc.) should be redacted from the documentation either by the parent/guardian or the school official prior to filing. **MOST INFORMATION PROVIDED BY PARENTS AND GUARDIANS TO ARIZONA PUBLIC SCHOOLS IS AN EDUCATIONAL RECORD MADE CONFIDENTIAL UNDER THE FEDERAL EDUCATIONAL RIGHTS AND PRIVACY ACT AND ARIZONA LAW UNLESS DESIGNATED BY THE SCHOOL AS**

⁸ See *Amphitheater Unified Sch. Dist. No. 10 v. Harte*, 128 Hart Ariz. 233, 234 (1981), § 15-187(C); noting that school districts and charter schools are political subdivisions.

DIRECTORY INFORMATION. A PARENT OR GUARDIAN MAY OPT OUT OF DIRECTORY INFORMATION IN ACCORDANCE WITH DISTRICT POLICY. OTHERWISE, EDUCATIONAL RECORDS ARE ONLY USED FOR LEGITIMATE EDUCATIONAL PURPOSES.

This Form Must be Completed as a Requirement of Enrollment



Arizona Department of Education
Arizona Residency Documentation Form

Student _____ School Blackwater Community School

School District or Charter Holder Akimel O'Otham Pee Posh Charter 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, Veteran's Administration, Arizona Department of Economic Security)
- _____ Temporary on-base billeting facility (for military families)
- _____ 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
- _____ 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. 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: Blackwater Community School

School District or Charter Holder: Akimel O'Otham Pee Posh Charter School

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 __ day of _____, 20____,

By _____

My Commission Expires:

Notary Public

BLACKWATER COMMUNITY SCHOOL
AKIMEL O'OTHAM PEE POSH CHARTER SCHOOLS INC.

Military Student Identifier Form

This Form Must be Completed as a Requirement of Enrollment

Parent(s)/Legal Guardian: _____

First and Last Name

Student's First/Last Name: _____

Student Grade level: _____

Please fill out the following form, sign, and return to the Office along with Enrollment documents.

MILITARY CONNECTED STUDENT

☐

Student is a dependent of a member of the army, navy, air Force, Marine Core or Coast Guard on Active Duty.

☐

Student is a dependent of a member of the Arizona National Guard (Army, navy, 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, or Coast Guard).

☐

None of the Above

☐

**Blackwater Community School
Akimel O’Otham Pee Posh Charter School
“Quality Education Begins Here”**



***Language Development: Restoration & Enhancement Program
Parental Notification and Consent Form
SY2024/ 2025***

As defined and regulated under the Indian School Equalization Program (ISEP), Blackwater Community School’s Language Development Program supports the reintroduction of the Akimel O’odam language and culture throughout the school. All students in grades preschool through fifth grade are eligible for services. The Culture Language Program is integrated into all classes as a weekly special.

I, _____, parent/guardian of _____,
grant Blackwater Community School permission to include my child in the
Language Development Program.

Parent/Guardian Signature

Date

Teacher’s Signature

Date

DOUBLE SIDED DOCUMENT

Blackwater Community School

"Quality Education Begins Here"

STUDENT SERVICES QUESTIONNAIRE

Student Name: _____ Grade: _____

1. Did your child receive any special help at his/her last school?

- | | |
|---|---|
| <input type="checkbox"/> Special Education | <input type="checkbox"/> Help to improve attendance |
| <input type="checkbox"/> Help to improve behavior | <input type="checkbox"/> 504 Accommodations |
| <input type="checkbox"/> ELL Services | <input type="checkbox"/> Homeless Services |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Tutoring |
| <input type="checkbox"/> Other: _____ | |

2. Has your child ever been retained (held back)?

☐ Yes ☐ No If yes, what grade? _____

3. Has your child ever been expelled?

☐ Yes ☐ No If yes, for what reason? _____

What School? _____

Is the expulsion cleared? ☐ Yes ☐ No

4. Do you and your student live in a fixed, regular, adequate nighttime residence?

☐ Yes ☐ No

(If you circled "Yes", stop here. If you circled "NO", please continue with this form.)

5. Where is your child/family currently living? (Check one box only.)

This information will be used to determine if your child qualifies for any additional assistance under the McKinney-Vento Act.

- ☐ In a single family residence
- ☐ With more than one family in a house or apartment due to economic hardship
- ☐ In a shelter or transitional housing program
- ☐ In a motel, car or campsite
- ☐ In a foster care placement
- ☐ Other: _____

Parent/Guardian Signature

Date

Thank you for taking the time to fill out this form. We look forward to working with you to help your child be successful in school!

DOUBLE SIDED DOCUMENT

Blackwater Community
School SY 2024- 2025

Uniform Agreement

Student Name _____ Grade _____

COMPLIANCE PROCEDURES:

First Offense: There will be a teacher/student conference as to why the student is not in uniform. A letter of notification on non-compliance will be sent home. The letter must be signed and returned to the classroom teacher.

Second Offense: A mandatory parent meeting will be scheduled to develop a written plan to resolve the non-compliance to the uniform policy.

Third Offense: The issue will be handled according to the school discipline policy.

By signing this you are agreeing to the Dress Code Policy and Consequences. If you have any questions please feel free to contact the school.

Parent Signature _____

Student Signature _____

Teacher Signature _____

Office Use:

☐ First Offense Date: _____

☐ Second Offense Date: _____

☐ Third Offense Date: _____

Blackwater Community School

SY 2024- 2025

INSTRUCTIONAL COMPUTING SERVICES EQUIPMENT CHECK-OUT AGREEMENT

Blackwater Community School's Instructional Computing Services Equipment (Laptop, iPad & other mobile computing devices) Loaner program is designed to provide access to technology tools for educational purposes only. The loaner laptop (or any other such computing device) is to be used for school related purposes only and will be returned by the end of the agreed-upon check-out period. The duration of such check-out may vary from an hour to a full instructional day. Students

1. The attached form must be signed by the student and parent/guardian of minor students before a laptop will be issued.
2. The recipient shall immediately report theft or damage of any kind to the loaner laptop to his/her teacher.
3. The computer and its settings are not to be changed or altered. The borrower shall be responsible for damage determined by the school to have been caused by abnormal wear and tear of the equipment caused by the borrower through overt action and/or negligence. Charges will be made to the borrower for repair and restoration of the equipment at the prevailing rates for such damage. Maintenance is not to be performed by the Borrower at any time.
4. Borrower agrees that the loaned equipment will remain with the borrower and will not be loaned, assigned, transferred, sold, or otherwise disposed of during the period of this agreement.
5. The usage of this device is strictly for educational purposes only and the equipment must stay within the assigned classroom of the student.

Student Name: _____

Grade Level: _____

By signing the form below, the student and/or the parent/guardian agree to:

- (a) Having read and understood the conditions of the Student Laptop Checkout Agreement
- (b) Receive, authorize, and take full responsibility for the use of the laptop by the student
- (c) Verify the Serial/Barcode Number on the equipment provided (Student/parent/guardian will receive a copy of this form when the laptop is issued to the student)
- (d) Pay the cost to repair and restoration of the equipment in case it is damaged/altered.

Student Signature

Date

Parent/Guardian Signature

(Parent/Guardian Printed Name)

Date

.....

Device Brand & Model #: _____ Asset Tag#: _____ Serial #: _____

Issue Date: _____ Return Date: _____ : Received by: _____

Photo & Activity Agreement Form

Student Name: _____

Photography and videography are important tools used to document and celebrate learning, activities, accomplishment, growth, and to boost confidence. Throughout the year, occasions will arise where photography and/or videography will be used for such purposes. Please indicate below what permissions are granted to Blackwater Community School for the 2024/25 school year.

I give permission for my child to: (Initial all that apply)

- _____ To be photographed for the Big News (School newsletter)
- _____ To be photographed and/or video recorded on fieldtrips
- _____ To be photographed for yearbook purposes
- _____ To be photographed and/or video recorded for our school website

Blackwater Community School holds several events at the District One Multi-Purpose building and Ballpark during school hours such as Awards Assemblies, Guest speakers, Water days, etc. Please indicate below that permission for your child to attend such activities is granted to Blackwater Community School for the 2024/25 school year.

I give permission for my child to:

- _____ Attend all school wide events held at the District One Multi-Purpose building and Ballpark during school hours.

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

Teacher Signature: _____ Date: _____

Principal Signature: _____ Date: _____



Ways for Parents/Guardians to get involved at school



Blackwater Community School encourages all parents and guardians to engage in school sponsored events and activities. Following are a few of the committees that you are welcome to sign up for:

1. **Parent Advisory Committee (PAC)**- This committee primarily is responsible to advise the school administration to ensure our school meets the needs of all Native children enrolled in our school. This committee meets at minimum twice a year.
2. **Title I Parental Engagement Committee**- Our school is eligible and receives Title I Program funding for our students. Administration would like to form a committee including parents/guardians and school employees to help suggest various ways to engage parents/guardians in the education of their children. This committee meets at minimum twice a year.
3. **Family Involvement Action Team Committee (FIAT)**- This committee is comprised of parents/guardians and school employees to plan and execute various events in and outside of the school. For example: monthly family literacy night events, fall festival, book fairs, and other activities that promote literacy in our community.
4. **Fifth Grade Promotion Committee**- The primary responsibility of this committee is to plan, organize, and execute two main events namely the End of Year Special Dinner for fifth grade students and the Fifth Grade Promotion Ceremony usually hosted at the District 1 Service Center.

I am interested in joining the following committee:

_____ Parent Advisory Committee (PAC)

_____ Title 1 Parental Engagement Committee

_____ Family Involvement Action Committee (FIAT)

_____ Fifth Grade Promotion Committee

Name (Please Print)_____

Phone(s)_____

Email_____



BLACKWATER COMMUNITY SCHOOL

"Quality Education Begins Here"



SY 24/25

Dear Parents/Guardians

Blackwater Community School will be providing 1 uniform per student at the start of 2024/2025 school year. It is our hope that we have all new uniforms available in the first week of school. In an effort to achieve this goal, we are asking parents and guardians to complete this form. There will be both Child and Adult sizes available. Please be sure to select both a shirt and a pant size, i.e.:

Shirt: Child Size: 4, Pants: Child Size: 6 or Shirt: Adult Size: M, Pants: Adult Size: 32/30

We appreciate all of your help!
Sincerely,

Lauren Allison
Secretary to Principal
Blackwater Community School

Fill out one section per student, if additional space is needed, you may write on back.

Uniform Order

Student Name: _____

Student Grade: _____

Shirt: Child Size: ____ or Adult Size: ____

Pants: Child Size: ____ or Adult Size: ____/____

Student Name: _____

Student Grade: _____

Shirt: Child Size: ____ or Adult Size: ____

Pants: Child Size: ____ or Adult Size: ____/____

Student Name: _____

Student Grade: _____

Shirt: Child Size: ____ or Adult Size: ____

Pants: Child Size: ____ or Adult Size: ____/____

Student Name: _____

Student Grade: _____

Shirt: Child Size: ____ or Adult Size: ____

Pants: Child Size: ____ or Adult Size: ____/____

Blackwater Community School

Consent for School Counseling Services



Dear Parent/ Guardian,

BWCS is committed to providing quality education to our students. In an effort to achieve this goal; school staff and parent/guardians may refer students for counseling or students may request counseling. The aim of the school counseling services is to help students have more effective education and socialization within the school community. Possible school counseling topics are coping with changes, transitions, self-esteem, friendship, stress management, fears or worries, conflict resolution, social skills, etc... These services are offered to every student in a 1:1 or small group setting as needed. School counseling should not substitute psychological counseling and or medication which is provided by outside resources.

Please feel free to call or email with questions or concerns.

Lindsey Wicks, M.S., M.Ed.

School Counselor

Blackwater Community School

Akimel O'Otham Pee Posh Charter School

(520) 215-7902

Lindsey.Wicks@bwcs.k12.az.us

____ I give my student permission to participate in school counseling services while attending BWCS.

____ I do not give my student permission to participate in school counseling services while attending BWCS.

Student Name: _____ Grade: _____ Teacher: _____

Parent/ Guardian Name: _____

Parent/ Guardian Signature: _____ Date: _____

Preferred Phone/ Email: _____

**Blackwater Community School
Akimel O'Otham Pee Posh Charter School
"Quality Education Begins Here"
3652 E. Blackwater School Rd., Coolidge AZ, 85128
Phone: (520) 215-5859 Fax: (520) 215-5862**



Request for Student Records

SY 2024/2025

Students Name: _____

Date of Birth: _____

Arizona SAIS#: _____

Enrolled in Grade: _____

Last School Attended: _____

School Address: _____

Parent/ Guardian Signature: _____

Please Include:

- 1. Date of Withdrawal**
- 2. Medical and Immunization Records**
- 3. All Assessment Results**
- 4. Psychological Reports**
- 5. Academic Progress Reports**
- 6. Any Discipline/Behavioral Documentation**
- 7. Other pertinent information regarding the health, welfare and educational progress of the student.**

Student Records
Blackwater Community School

1st Request

2nd Request

Handbook Policy Form

Student Name: _____

I have received and read the Parent Handbook and agree to abide by its provisions. I understand that this handbook supersedes all previous handbooks. I understand that this handbook is presented as a matter of information only and is a summary of the official policy manual adopted by the School Board of Trustees. I understand that the School Board of Trustees may adopt changes to the policies at any time. If any changes are made, updates to this handbook will follow.

Check each of the following boxes to indicate that you have read and understand the policy:

- _____ I have read the Policy for Truancy (Page 11-12)
- _____ I have read the Policies Regarding Drug, Alcohol, and Tobacco Use (Page 14-15)
- _____ I have read the Dress Code Policy (Pages 15-16)
- _____ I have read the Policy for Cell Phones & Personal Electronic Devices (Page 16-17)
- _____ I have read the policy for Weapons in School (Page 17)
- _____ I have read the Anti-bullying Pledge (Page 20)
- _____ I have read the Pick Up/ Drop Off Policy and I understand that I must follow the guidelines set for Bus Note Requests (Page 22)
- _____ I have read the Field Trip Policy (Page 22-23)
- _____ I have read the Library Policy (Page 23)
- _____ I have read the Internet Guidelines for User Accounts (Page 26)
- _____ I have read the School Compact Agreement (Page 36)

Parent/Guardian Signature: _____ Date: _____

Student Signature: _____ Date: _____

Teacher Signature: _____ Date: _____

McKinney-Vento Eligibility Questionnaire

This Questionnaire is intended to address the McKinney-Vento Act 42 U.S.C 11435. The answers to this residency help determine the services the student may be eligible to receive.

1. The student lives with:
____ Parent(s)/legal guardian(s)
____ An adult who is not the parent/legal guardian
____ No adult: student is unaccompanied youth
____ Student is an adult living on his/her own
2. Check any that apply:

SECTION A

- ☐ Doubled up with relatives or friends due to loss of housing or economic hardship
- ☐ Youth living with friends or family members (other than parent/guardian)
- ☐ Living temporarily in hotel/motel In a
- ☐ shelter
- ☐ Living in a car, campground, trailer etc. Notes _____

If you checked a box in Section A, complete this form and School's Enrollment Packet.

SECTION B

- ☐ Choices in Section A do not apply

If you checked this box, it is not necessary to complete this form. Continue with School's Enrollment Form

Name of Student: _____

Birth Date: ____/____/____ Age: ____ Grade in School: ____
 Month / Day / Year

Siblings: _____

School most recently attended: _____

Name of Parent(s)/Legal Guardian: _____

Temporary/Current Address: _____

Signature of Parent/Legal Guardian: _____ Date: _____

Registrar: If an option in Section A is checked, please scan and email completed form to: Special Education coordinator/MCV Liaison. The original form is kept in the enrollment packet.