

# SOUTHWEST LEADERSHIP ACADEMY

4301 W. FILLMORE STREET PHOENIX, AZ 85043

PHONE: 602-265-2000 • FAX 602-278-0953

WWW.SOUTHWESTLEADERSHIPACADEMY.COM



## REQUIRED ENROLLMENT DOCUMENTATION 2018/2019

Thank you for considering **Southwest Leadership Academy** for your student's educational needs and for allowing us to share with you the benefits and opportunities available at our school.

In an effort to review and process your student's registration packet in an efficient and timely manner and to have our records in compliance, **all forms must be turned into the School Office by the Parent or Guardian.** There are several **required** documents that will need to be provided along with the completed registration packet. We have included the following list for your convenience.

### REQUIRED ENROLLMENT DOCUMENTS:

**Complete Registration Packet** – The following documents will be required by all students requesting enrollment to Career Success Schools.

- |  |   |
|--|---|
| <input type="checkbox"/> Enrollment Application                    | <input type="checkbox"/> Home Language Survey   |
| <input type="checkbox"/> Medical/Transportation Authorization      | <input type="checkbox"/> Guidelines to Determine Eligible Students <input type="checkbox"/> |
| <input type="checkbox"/> Family Educational Rights and Privacy Act | <input type="checkbox"/> Arizona Residency Form <input type="checkbox"/>                    |
| <input type="checkbox"/> Parent/Family Involvement                 | <input type="checkbox"/> Free and Reduced School Meal Application                           |

### Additional information required to complete the enrollment process.

- Proof of Residency**
- Birth Certificate** (copy) or other proof of birth i.e. Baptismal Certificate with birth date
- Immunization Records**– Proof of all required immunizations or a valid exemption
- Transcripts / Academic Progress**
- AZ Merit Test Results / Academic Assessments**(if applicable)
- Withdrawal Form** from previous school attended (if applicable)
- Current IEP** (if applicable)
- Current MET Re-Evaluation including last completed Psycho-educational Evaluation**
- Most current 504 Plan including all documentation**

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## 2018/2019 Enrollment Packet

Date: \_\_\_\_\_

### Applicant Information *(Please print neatly)*

Grade: \_\_\_\_\_

**Legal Name** \_\_\_\_\_

Last/Family/Sur (Enter name exactly as it appears on official documents) First/Given Middle (Complete) Jr. etc

**Birth Date** \_\_\_\_\_ **Male** \_\_\_\_\_ **Female** \_\_\_\_\_ **Age** \_\_\_\_\_ **Birth City** \_\_\_\_\_ **Birth State** \_\_\_\_\_  
mm/dd/yyyy

**Current Mailing Address:** \_\_\_\_\_

Number & Street

Apartment #

City/Town

County/Parish

State/Province

Country

Zip/Postal Code

Phone Number: \_\_\_\_\_

## Family

**Student Lives With:**  Both Parents  Mother  Father  Legal Guardian  Relative  Ward of the Court  Other

If parents live separately, who will receive mailings?  Both Parents  Mother  Father  Guardian  Relative  Other

**If both wish to receive mailings please include 2<sup>nd</sup> mailing address.**

**2<sup>nd</sup> Mailing Address:** \_\_\_\_\_ **Apt.** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Parent 1:**  Mother  Father  Legal Guardian

**Parent 2:**  Mother  Father  Legal Guardian

\_\_\_\_\_  
Last/Family/Sur First/Given Middle

\_\_\_\_\_  
Last/Family/Sur First/Given Middle

\_\_\_\_\_  
Home address if **different** from above

\_\_\_\_\_  
Home address if **different** from above

\_\_\_\_\_  
Number & Street Apartment #

\_\_\_\_\_  
Number & Street Apartment #

\_\_\_\_\_  
City/Town State/Province Country

\_\_\_\_\_  
City/Town State/Province Country

**Telephone:**

**Home** (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

**Cell** (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

**Work** (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

**E-mail** \_\_\_\_\_

**Occupation** \_\_\_\_\_

**Employer** \_\_\_\_\_

Parent Signature \_\_\_\_\_

**Telephone:**

**Home** (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

**Cell** (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

**Work** (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

**E-mail** \_\_\_\_\_

**Occupation** \_\_\_\_\_

**Employer** \_\_\_\_\_

Student Signature \_\_\_\_\_

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## Emergency Contact Information

### Contact 1

Last/Family/Sur \_\_\_\_\_ First/Given \_\_\_\_\_ Middle \_\_\_\_\_

Relationship to Student \_\_\_\_\_

#### Telephone:

Home (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

Cell (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

Work (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

Is this person authorized to release student?  Yes  No

### Contact 2

Last/Family/Sur \_\_\_\_\_ First/Given \_\_\_\_\_ Middle \_\_\_\_\_

Relationship to Student \_\_\_\_\_

#### Telephone:

Home (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

Cell (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

Work (\_\_\_\_\_) \_\_\_\_\_  
Area/Country/City Code

Is this person authorized to release student?  Yes  No

## Rights Under Title IX

Southwest Leadership Academy does not discriminate on the basis of race, color, national origin, sex or handicap in its educational program or activities as required by Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and of Section 504 of the Rehabilitation Act of 1973, respectively.

## Title One Parent Involvement Policy

Southwest Leadership Academy will put into operation programs, activities and procedures for the involvement of parents in all of its schools with Title I, Part A programs, consistent with section 1118 of the Elementary and Secondary Education Act (ESEA). Those programs, activities and procedures will be planned and operated with meaningful consultation with parents of participating students.

## Student Personal Information Release

Southwest Leadership Academy, occasionally publishes the first name and/or pictures of students involved in school activities on our web site and other forms of media. This form gives you the option to choose whether or not you would like your child's first name and/or pictures featuring your child, published on our web site and other media.

I, \_\_\_\_\_, **Do Not Want** Southwest Leadership Academy, to publish the following information for my student:

- Student's name (*first name only*) on the school's web site, which is available on the World Wide Web:  
(Example: John won 1<sup>st</sup> place at the State Science Fair; Amy demonstrates volcanic eruptions in Science class.
- Student's photo on the school's web site.
- Student's photo/ and full name in CSS Publications: i.e.; CSS newsletters, local Newspaper articles, etc.
- Student to appear on Television.
- Student's photo (no names) in CSS advertising venues. i.e.; brochures, newspapers ads, etc.

Parent Signature \_\_\_\_\_ Student Signature \_\_\_\_\_

## Permission for Internet Usage

This does not replace the Technology Policy or imply permission to use the school's Internet services. Publication of this data is not required to use Internet services.

I, \_\_\_\_\_, authorize my student, \_\_\_\_\_ to use the World Wide Web for research & classroom assignments/projects.

Signature of Parent/Guardian \_\_\_\_\_ Relation \_\_\_\_\_

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## Demographics

### Home Language Survey

This question is in compliance with A.R.S. 15-756. **Identification of English Language Learners.** Your response to the following question will be used to determine whether your student will be assessed for English language proficiency:

What is the primary language used in the home regardless of the language spoken? \_\_\_\_\_

Language most often used by the student

What is the language most often spoken by the student? \_\_\_\_\_

Language most often spoken by the student

What is the language that the student first acquired? \_\_\_\_\_

Language first acquired by the student

Are you proficient in any other languages? \_\_\_\_\_

## DEMOGRAPHIC QUESTIONNAIRE

(Circle all that apply)

**Presently, where does the student stay at night?**

- Yes  No Student's immediate family resides in their own home or apartment (No one outside of the immediately family is present)
- Yes  No With Grandparents, Aunt, Uncle or other family member who is not immediately family.
- Yes  No With more than one family member in a house or apartment.
- Yes  No In a group home or group shelter.
- Yes  No In a motel.
- Yes  No In a car.
- Yes  No At a campsite.
- Yes  No Other: \_\_\_\_\_
- Yes  No None of the above; explain: \_\_\_\_\_

### Referred By:

- Friend  Sibling  Brochure/Flyer  Drive-By
- Student  Internet  School  Yellow Pages
- Other \_\_\_\_\_

### Race and Ethnicity Data Collection

In accordance with federal guidance, 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.

#### 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 student 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.)
- 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.)

### Asbestos:

Asbestos materials were not identified within any Career Success School's structures; however the EPA requires an asbestos management plan (MP). The MP is available for review in the administrative office of each campus. Thank you.

Parent Signature \_\_\_\_\_ Student Signature \_\_\_\_\_

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## STUDENT EMERGENCY INFORMATION AND TRANSPORTATION PERMISSION FORM 2018/2019

Name of Student \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male or Female \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_

Mother Name \_\_\_\_\_ Mother Work Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Father Name \_\_\_\_\_ Father Work Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Guardian Name \_\_\_\_\_ Guardian Work Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relation to Student \_\_\_\_\_

(Other than parent/guardian) Phone (\_\_\_\_\_) \_\_\_\_\_

Medical Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

Name of Insured \_\_\_\_\_ I.D. Number \_\_\_\_\_

Physician Name \_\_\_\_\_ Phone \_\_\_\_\_ Hospital Preference \_\_\_\_\_

Please Note: There is not a school nurse on campus.

**Does this student have any medical, physical, or mental health conditions the school should be aware of?**  No  Yes

If yes, please explain. \_\_\_\_\_

**Does this student need to take any medications?**  No  Yes: Medication(s) \_\_\_\_\_

Dosage and Time of Day \_\_\_\_\_

**If yes, will these medications be taken during school hours?**  No  Yes

**Is the student allergic to any medication?**  No  Yes: Medication(s) \_\_\_\_\_

**Is the student allergic to any foods?**  No  Yes: Foods(s) \_\_\_\_\_

**I authorize a school representative to dispense my student's prescription medication according to the instructions. If my student's medication changes, I will notify the school immediately. I understand students are not to keep their own prescription medications. I will notify the school in advance if my student requires an inhaler during school hours**

I hereby give permission for my student listed above to be transported by Southwest Leadership Academy for the purpose of school related activities.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

I also give agents of Southwest Leadership Academy permission to authorize any emergency medical treatment that may become necessary while my student is in school in the event that I cannot be reached. Furthermore, I realize that any expenses related to medical attention given are my responsibility.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

In case of injury or sudden illness, I hereby give authority to any hospital or doctor to render immediate aide as might be required at the time, for his/her health and safety. I understand that the expense of this service will be my responsibility.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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## Academic Information

Current Grade for 2018/2019: \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Current or Last School Attended District City State Last Date of Attendance Grade

Are you current on credits?  Yes  No (Please submit an unofficial transcript along with this enrollment packet.)

Have you tested for: AIMS  Yes  No SAT  Yes  No ACT  Yes  No

Is the student a primary caregiver or financially responsible for dependents and, therefore, may require a flexible school schedule?

Yes  No If yes, explain: \_\_\_\_\_

As a primary caregiver, does the student require daycare for a dependent 0-5 years of age?

Yes  No If yes, explain: \_\_\_\_\_

Have you ever been found responsible for a disciplinary violation at any educational institution you have attended, whether related to academic misconduct or behavioral misconduct, which resulted in your probation, suspension, removal, dismissal, or expulsion from the institution?

Yes  No If yes, explain: \_\_\_\_\_

Currently on:  Probation  Parole  N/A

Has the student ever been out of school for:  -4 week's  One semester  One year  Two years?

If yes, explain: \_\_\_\_\_

What is your future job or career goals? \_\_\_\_\_

## Educational Background / Accommodations

### Exceptional Student Services (Circle all that Apply)

In order to provide continuity in the educational environment, it is important that Southwest Leadership Academy be informed of any special education services received by your child.

Yes  No Does your student have any learning or behavioral needs?

Please give a brief explanation: \_\_\_\_\_

Yes  No Does your student receive Special Education Services Date of last I.E.P. \_\_\_\_\_

Resource  Yes  No Self Contained  Yes  No Other (Please Explain) \_\_\_\_\_

Yes  No My child **has** had special education testing or evaluations

Yes  No My child **has** been enrolled in a special education program at another school.

Yes  No My child is on a 504

Yes  No My child is involved in an English as a second language program (ELL)

## Inclusive Education Philosophy

Southwest Leadership Academy embraces the philosophy of inclusion, believing that special education students can best be educated in the regular classroom. Our teachers accept responsibility for all students in their classroom and modify, accommodate and adjust teaching techniques and classroom activities to meet the unique learning abilities of all students. Special education staff supports the regular classroom teacher with this process. There are not two distinctly different types of students, e.g. "special" and "regular". All students are individuals with their own unique set of physical, intellectual and psychological characteristics that influence their instructional needs. There are not two discrete sets of instructional methods – one set for "special" students and another for "regular" students. Individualized instructional programs are designed for each student.

### Basic Beliefs and Expectations

- Inclusion is the underlying philosophy by which all students are educated.
- All students are educated with chronologically age appropriate peers.
- All students are educated full time in the general education classroom.
- All students learn and develop individually and the curriculum is modified or adapted to allow students to progress at their individual rates. Students are not penalized for the inability to progress at grade level.
- General education teachers assume responsibility to teach and meet the cognitive, affective and social needs of all students with special education teachers and staff providing support.
- Teaching strategies that facilitate the education of multi-level abilities in each class are used by all teachers (e.g. cooperative learning, project learning, mastery learning, and curriculum compacting, independent projects, flexible groupings, learning centers, and teaching to learning styles such as visual, auditory and manipulative)

Parent Signature \_\_\_\_\_

Student Signature \_\_\_\_\_

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## Southwest Leadership Academy Parent, Family and Community Involvement Policy

We believe that for all students to have a successful education experience it requires a partnership that includes the student, teachers, staff, parents and the learning community.

Our involvement includes the following:

- Providing the opportunity for all students to receive a high quality education
- Setting high expectations for all students in both academics and conduct
- Providing curriculum and instruction aligned with the Arizona Academic Standards
- Balancing academic accountability with care and concern
- Providing consistent communication with parents, including returning phone calls and emails in a timely manner
- Requesting parent and student input on school improvement, assessment and programming through surveys, emails, meetings and other appropriate means.
- Delivering a safe and respectful environment for students, staff and faculty
- Participating in high quality, ongoing professional development to assist teachers and other staff members in improving their abilities to deliver high quality instruction.
- Offering Educational services to all eligible students and their families.

Parents' involvement in their students' education are as follows:

- Knowing the school's policies and procedures and supporting them, including those related to discipline, attendance and dress code
- Ensuring that students are here before school begins each day and in attendance for the scheduled school days, as required by state law
- Consistently communicating with teachers and staff regarding academic and other issues relating to the student's education
- Supporting the school regarding accountability through standardized testing by making sure that students are in school on time the day of the test and encouraging students to do their best
- Encouraging students to set academic goals each year and develop a strategy for achieving those goals
- Participating with students on planning for their goals after high school and helping in the implementation of strategies to achieve those goals
- Tracking high school graduation requirements, as well as higher education requirements, with the assistance of appropriate school personnel
- Returning calls or emails from the school as soon as possible
- Volunteering to provide additional resources to further all students' education
- Setting high expectations for students

Student's involvement in the educational process is as follows:

- Setting high expectations for themselves and consistently working toward those expectations
- Arriving at school on time each day
- Attending school in accordance with state law
- Knowing the school's policies and procedures and abiding by them consistently
- Acting in a safe and respectful way to self and others
- Doing their best everyday so teachers and others will have an accurate picture of students' academic ability
- Consistently communicating with teachers and staff regarding issues regarding their education
- Setting goals for after high school graduation, which may include the military or attending a community college, university or technical school and working towards them
- Tracking their progress toward high school graduation requirements with the assistance of appropriate school personnel.

I have read the **Parent, Family, and Community Involvement Policy** and agree to comply with the expectations.

Parent Signature \_\_\_\_\_ Student Signature \_\_\_\_\_

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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.

1535 West Jefferson Street, Phoenix, Arizona 85007 • 602-542-0753 • [www.azed.gov/oelas](http://www.azed.gov/oelas)



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## Arizona Department of Education Arizona Residency Documentation Form

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

School District or Charter Holder \_\_\_\_\_

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
- \_\_\_\_\_ 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

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## 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:
  - o 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;
  - o Other schools to which a student is seeking to enroll;
  - o Specified officials for audit or evaluation purposes;
  - o Appropriate parties in connection with financial aid to a student;
  - o Organizations conducting certain studies for or on behalf of the school;
  - o Accrediting organizations;
  - o To comply with a judicial order or lawfully issued subpoena;
  - o Appropriate officials in cases of health and safety emergencies; and
  - o 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
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This notice is available in English and Spanish on the ADE website at [www.ade.az.gov/ess/resources](http://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.