

Student Name _____ First Day of Attendance _____

**Northern Arizona Academy Taylor
Enrollment Packet 2026-2027**

Career Development, Inc. Administration:

PO Box 125

Taylor, AZ 85939

Tel. (928) 536-3920/ Email: nsellers@naacharter.org

Taylor NAA:

1300 S. Centennial Blvd.

PO Box 125

Taylor, AZ 85939

(928) 536-4222/

Email: lhumphries@naacharter.org

NEW STUDENT ENROLLMENT:

The following information is requested at the time of registration:

____ Birth Certificate or other reliable proof of the student's identity and age

____ Completed registration packet and additional enrollment paperwork

MISSION:

Northern Arizona Academy's mission is to create an alternative learning environment that includes flexible scheduling, small class sizes, responsive academic support, and credit recovery options. We serve at-risk students, such as those who are credit deficient or may be underserved in a traditional school setting so they can graduate and successfully prepare for their future.

VISION:

Northern Arizona Academy will guide students in developing the social and academic skills necessary to achieve their goals and become productive members of society.

Student Information

Student Name: _____
First Middle Initial Last

Parent/Legal Guardian #1: _____
First Last

Phone: _____ Email: _____

Best method of contact: Phone / Email Relationship to Student: _____

Parent/Legal Guardian #2: _____
First Last

Phone: _____ Email: _____

Best method of contact: Phone / Email Relationship to Student: _____

Student checkout authorization

In addition to parents / guardians, the following individuals or organizations (Change Point drivers, friends, etc.) are authorized to checkout my student from school:

[] No one else is able to checkout my student.

1. Name: _____

Relationship: _____

Home phone: _____

2. Name: _____

Relationship: _____

Home phone: _____

3. Name: _____

Relationship: _____

Home phone: _____

4. Name: _____

Relationship: _____

Home phone: _____

Parent Signature: _____

Date

ENROLLMENT PREFERENCE

Enrollment preference is given to students who meet any of the following criteria. A.R.S. § 15-184(B). Please indicate if any of the following apply to the student that is enrolling:

- _____ Previously attended this charter school.
- _____ Date(s) of prior attendance: _____
- _____ Sibling of _____, who is already enrolled in this charter school.
- _____ None of the above

ENROLLMENT INFORMATION AND DOCUMENTATION

Students who are Homeless or Unaccompanied Youth

If the enrolling student is considered to be homeless or an unaccompanied youth, complete and submit the Student Residency Questionnaire (SRQ) and, if applicable, the Caregiver's Authorization Affidavit included in this enrollment packet. These documents are necessary for determination of whether the Student qualifies as a homeless or unaccompanied youth pursuant to the McKinney-Vento Homeless Assistance Act. In addition, please refer to the document titled "Rights of Homeless Students" also included in this enrollment packet.

Students who are homeless or unaccompanied youth shall be enrolled in the school regardless of the ability to provide the verification of the student's age and identity or residency documentation as outlined below.

McKinney-Vento Homeless Assistance Act, 42. U.S.C. 1141-11435. Individuals enrolling a student who is considered to be homeless or an unaccompanied youth are encouraged, however, to submit such information/documentation, if available, in order to assist with the enrollment process and providing appropriate services.

Student Age and Identity

Student Date of Birth: _____ Grade for 26-27 School Year: _____

The above information is required to ensure that the student is placed in the correct grade level or cohort.

Verification of Student's Age and Identity: Pursuant to A.R.S. §15-828(A), within thirty days of enrollment¹, one of the following must be provided to verify the student's age and identity:

1. A certified copy of the pupil's birth certificate,
2. 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 or
3. A letter from the authorized representative of an agency having custody of the pupil, pursuant to Arizona Revised Statutes, Title 8, Chapter 2, certifying that the pupil has been placed in the custody of the agency as prescribed by law.

¹ Failure to submit verification of age and identity shall result in referral to the appropriate local law enforcement agency for investigation. A.R.S. § 15-828(E).

Military Student Identification

Parents and/or legal guardians may decline to answer; in which case, the student will be assumed not to be a dependent of a member of the U.S. military.

_____ Student is a dependent of a member of the United States military services, defined as one of the following:

1. Active Duty Army, Navy, Air Force, Marine Corps, or Coast Guard
2. Full-time member of the National Guard or Reserve Forces of either the U.S. Army, Navy, Marine Corps, or Air Force
3. Member of the National Guard or Reserve Force of either the U.S. Army, Navy, Marine Corps, or Air Force

_____ Student is not a dependent of any of the above

Arizona Residency

This information is collected pursuant to A.R.S. § 15-802(B) and is required for enrollment.

Student Home Address:

Street Address

City

State

Zip Code

To confirm the student's residency, the Parent/Legal Guardian of the student must complete and submit the Arizona Department of Education ("ADE"), Arizona Residency Documentation Form and, if applicable, the ADE Affidavit of Shared Residency.² If submitting an Affidavit of Shared Residency, the form must be signed and notarized and the original submitted to the School. Both forms are included in this enrollment packet.

Mailing Address, if different than Home Address:

City

State

Zip Code

Disciplinary History

This information is collected pursuant to A.R.S. § 15-184(I) and may be a consideration for enrollment.

Has the student ever been expelled from a previous school: _____

Is the student in the process of being expelled from another school: _____

If the answer to either of these questions is "yes", please explain:

² Students who do not have proof of Arizona residency may be admitted, pursuant to the policies of the governing board, upon payment of tuition as governed by A.R.S. § 15-823.

Student Demographics

To comply with federal and state reporting requirements, charter schools are required to ask the following questions. All answers are **optional** and will not affect enrollment. Should the Parent/Legal Guardian choose not to answer the following questions, the School is required to report the student's ethnicity and race based on the information and documentation in its possession.

Student's Ethnicity: _____ Hispanic or Latino
_____ Not Hispanic or Latino

Student's Race: _____ American Indian or Alaska Native
_____ Asian
_____ Black or African-American
_____ Native Hawaiian or Other Pacific Islander
_____ White

Emergency Information

My child has the following medical conditions:

- ☐ Diabetes
- ☐ Heart Problems
- ☐ Hearing Impairment
- ☐ Physical Impairment
- ☐ Vision Impairment
- ☐ Asthma
- ☐ ADD/ADHD
- ☐ Bipolar Disorder
- ☐ Depression
- ☐ Convulsions
- ☐ Other (please explain):

Allergies:

Taking Medication:

NOTE: If your child is on medication and it must be taken at school, you are required to fill out a medication form, available in the front office, and give the medications directly to the Campus Manager. Students may not, under any circumstances, transport and carry their own medications for consumption at school. The only exception is made for asthma inhalers.

INFORMATION AND DOCUMENTATION REQUIRED FOR ATTENDANCE

The following information and documentation is required for attendance but is not required for enrollment.³ Parents/Legal Guardians are encouraged, however, to submit the following, if available at the time of enrollment, in order to ensure the timely provision of services to the Student.

Student Withdrawal Form

All students who previously attended an Arizona school must submit a properly completed and signed ADE Official Notice of Pupil Withdrawal form prior to attending the School. A.R.S. § 15-827. This form is required to be submitted prior to the Student attending but is not required for enrollment.

An ADE Official Notice of Pupil Withdrawal form is included in this enrollment packet. You may submit this form directly to the student's prior school, or you may complete items 1 through 15 and return it to the School for submission to, and completion by, the prior school. In either case, this form must be returned to the School prior to the Student attending.

Immunizations

Before attending any district or charter school, students are required to demonstrate proof of immunization, an immunization exemption or an immunization schedule consistent with the Arizona Department of Health Guidelines. A.R.S. §§ 15-872 and -873. If available, attach a copy of the student's current, up-to-date immunization records, immunization exemption form, or immunization schedule with this enrollment packet. If not currently available, such records must be submitted to the School prior to the Student attending. For more information on immunizations, exemptions or schedules, please contact the School.

³ Students who are considered homeless or unaccompanied youth should work with the School and the Local Homeless Liaison for compliance with the immunization and student withdrawal requirements.

SUPPLEMENTAL FORMS AND INFORMATION

The enrolling school is required to request academic records from the student's previous school. A.R.S. § 15-828(G). Accordingly, the following information and documentation is not required for enrollment or attendance. However, Parents/Legal Guardians may choose to submit such records that are in their possession in order to ensure the timely provision and continuity of services.

Prior Academic Records

The enrolling school is required to request academic records from the student's previous school. A.R.S. § 15-828(G). However, Parents/Legal Guardians may submit academic records in their possession in order to ensure the timely provision of services. If you would like academic records in your possession to be considered for continuity purposes, please attach a copy when submitting this enrollment packet. Such records may include, but are not limited to, transcripts, report cards, test scores or other records that will assist in placing the student in the correct grade level, course, and/or classroom. If prior academic records are not provided, the School will enroll the Student, permit the Student to attend classes and request the Student's records from the prior school. Any necessary adjustments will be made upon receipt and review of the Student's prior records.

IEP/504 Plans

The enrolling school is required to request the Student's records from the previous school. A.R.S. § 15-828(G). However, Parents/Legal Guardians may submit a Student's IEP or 504 Plan that is in their possession. If you would like submit such documentation in order to ensure the continuity of services for your Student, please attach a copy to this enrollment packet.

Custodial or Other Legal Documents

Please submit any custodial or other legal documents of which the School should be aware. Such documents may include, but are not limited to, custody or visitation agreements, restraining orders, foster care agreements or similar documents that have bearing on student safety or the communication between the School and the Student's family.

PARENT/LEGAL GUARDIAN ACKNOWLEDGEMENT

I hereby acknowledge that I have thoroughly read and understood this enrollment packet in its entirety and that I am officially attempting to enroll the student in this School. I am aware that submission of this enrollment packet does not guarantee a seat. If there is insufficient capacity to enroll all pupils that submit a timely application, the school will follow its equitable enrollment process and notify me of my student's status.

Parent/Legal Guardian Signature: _____

Date Enrollment Form was completed: _____

Request for Records

Previous School Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone Number: (____) _____ Fax Number: (____) _____

Student Name: _____ Date of Birth: _____ Grade: _____

PLEASE FORWARD THE FOLLOWING RECORDS:

- ☐ State Testing Score(s)
- ☐ Birth Certificate
- ☐ Psychological
- ☐ Health/Immunization Records
- ☐ Transcript
- ☐ Gifted Program
- ☐ Withdrawal Grades
- ☐ NWEA Scores

In accordance with the Educational Amendments for 1974, "Protection of the Rights and Privacy of Parents and Students", section 438, subsection (B)(1), parts A & B, page 97: "School officials, including teachers with the educational institution and officials of other school systems in which the students may intend to enroll, may receive a student's records without written consent for such release." However, in the event certain records being requested require parental consent, such authorization by parent or legal guardian is below.

In accordance with ARS 15-828(f)...Notwithstanding any financial debt owed by the pupil, any school requested to forward a copy of a transferring pupil's record to the new school shall comply and forward the record within ten school days after receipt of request.

I authorize this request for records as parent/legal guardian.

Parent/Legal Guardian Signature

Date

Authorized School Signature

Date

Please send records to:

Northern Arizona Academy for Career Development, Inc.

Attn: Registrar

PO Box 125

Taylor, AZ 85939

Email: lhumphries@naacharter.org

Request for Special Education Records

Please fill out this form only if your student has been in a Special Education Program or had an IEP.

Previous School Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone Number: (_____) _____ Fax Number: (_____) _____

Student Name: _____ Date of Birth: _____ Grade: _____

PLEASE FORWARD A CURRENT COPY OF THE FOLLOWING RECORDS:

- ☐ Psychological Evaluation
- ☐ Complete IEP report
- ☐ Eligibility Statement
- ☐ All Prior Written Notices
- ☐ Consent to Evaluate
- ☐ Placement Statement
- ☐ 45 Day Screening
- ☐ Expulsion/Suspension(s)
- ☐ Documentation of Behavioral Problems

In accordance with the Educational Amendments for 1974, "Protection of the Rights and Privacy of Parents and Students", section 438, subsection (B)(1), parts A & B, page 97: "School officials, including teachers with the educational institution and officials of other school systems in which the students may intend to enroll, may receive a student's records without written consent for such release." However, in the event certain records being requested require parental consent, such authorization by parent or legal guardian is below.

In accordance with ARS 15-828(f)...Notwithstanding any financial debt owed by the pupil, any school requested to forward a copy of a transferring pupil's record to the new school shall comply and forward the record within ten school days after receipt of request.

I authorize this request for records as parent/legal guardian.

Parent/Legal Guardian Signature

Date

Authorized School Signature

Date

Please send records to:

Northern Arizona Academy for Career Development, Inc.
Attn: Registrar
PO Box 125
Taylor, AZ 85939
Email: lhumphries@naacharter.org



The Educational Rights of Homeless Children and Youths

The LEA shall provide an educational environment that treats all students with dignity and respect. Every student experiencing homelessness shall have access to the same free and appropriate educational opportunities as students who are not homeless. This commitment to the educational rights of children, youth, and unaccompanied youth experiencing homelessness applies to all services, programs, and activities provided or made available by the LEA.

McKinney-Vento Definition of Homeless:

The term “homeless children and youth”— means individuals who lack a fixed, regular, and adequate nighttime residence [\[42 U.S.C. § 11434a\(2\)\]](#).

A student may be considered eligible for services as a “Homeless Child or Youth” under the McKinney-Vento Homeless Assistance Act if presently living in one of the following situations:

- Sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason,
- Living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations,
- Living in emergency or transitional shelters; or are abandoned in hospitals,
- Have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings,
- Living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings, or
- Is a migratory child who qualifies as homeless for the purposes of this subtitle because the children are living in circumstances described above.

The Educational Rights of Homeless Children and Youths, 2/2025

To remove educational barriers for children and youths experiencing homelessness, the McKinney-Vento Homeless Assistance Act mandates the following:

Immediate Enrollment: Documentation and immunization records cannot serve as a barrier to the enrollment in school [42 U.S.C. §11432(g)(3)(C)].

School Selection and Maintained Enrollment: McKinney-Vento eligible students have a right to select from the options outlined below. Students may remain enrolled in their selected schools for the duration of homelessness, and until the end of the academic year upon which they are permanently housed or enroll the child or youth in any public school that non-homeless students who live in the attendance area in which the child or youth is living are eligible to attend [42 U.S.C. §§11432(g)(3)(A); (g)(3)(B); (g)(3)(I)(i)].

School of Origin	School of Residency
The school the student attended when permanently housed	The school in the attendance area in which the student currently resides
The school in which the student was last enrolled	

Transportation Services: McKinney-Vento eligible students attending their School of Origin have a right to transportation to and from the School of Origin [42 U.S.C. §11432(g)(1)(J)(iii)].

Participation in Programs: McKinney-Vento eligible students are guaranteed the right to services comparable to services offered to other students in the school [42 U.S.C. §§11432(g)(4); (g)(6)(iii)].

Unaccompanied Youth Experiencing Homelessness: McKinney-Vento eligible students are guaranteed the right to immediate enrollment without proof of guardianship [42 U.S.C. §11432(g)(1)(H)(iv)].

Access to Extracurricular Activities: Removal of barriers to accessing academic and extracurricular activities for homeless students who meet relevant eligibility criteria [42 U.S.C. §11432(g)(1)(F)(iii)].

Dispute Resolution: If you disagree with school officials about enrollment, transportation, or fair treatment of a homeless child or youth, you may file a dispute with the school district by contacting the McKinneyVento Homeless Liaison within seven (7) business days of receiving the written eligibility determination notification [42 U.S.C. §11432(g)(3)(E)].

Appointment of a McKinney-Vento Homeless Liaison: The McKinney-Vento Homeless Assistance Act mandates the appointment of a local Homeless Liaison in every school district or local education agency (LEA) to ensure that homeless children and youth are enrolled in and have a full and equal opportunity to succeed in school [42 U.S.C. §§11432(g)(1)(J)(ii); (g)(6)(A)].

For more information, refer to [Arizona Department of Education Homeless Education Program, 42 USC CHAPTER 119, SUBCHAPTER VI, Part B: Education for Homeless Children and Youths](#), and [the Arizona ESEA Consolidated State Plan](#). You may also contact:

LEA Homeless Liaison: Joshua Lagesse

Northern Arizona Academy
Physical: 1300 Centennial Blvd Mailing: PO BOX 125
Taylor, AZ 85939 928-536-4222
jlagesse@naacharter.org

State Homeless Education Program Coordinator

Arizona Department of Education
1535 W. Jefferson Street
Phoenix, AZ 85007
(602) 542-4963
Homeless@azed.gov





Arizona Student Residency Questionnaire

Information contained on this form is confidential and used to determine whether a child or youth meets the definition of homeless under the McKinney-Vento Act. The Education for Homeless Children and Youth (EHCY) program as authorized under Title VII-B of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11431 et seq.). Please note, false claims about living situations may affect enrollment.

Section A

Today's date: _____

Name of individual completing this form: _____

Your telephone number: _____ Your email address: _____

Student name: _____

Last school attended: _____ Current grade: _____ Birth date: _____

Do you have additional children attending school in our district? Yes ☐ No ☐

Do you have children of the preschool age? Yes ☐ No ☐

Please provide information about additional children attending school in our district or of preschool age.

+				
Last Name	First Name	Grade	School	District

Address of where the student slept last night: _____

Is this address based on a temporary living arrangement due to the loss of housing? Yes ☐ No ☐

(Examples: sharing the housing with others due to economic hardship or similar reason; hotel/motel; shelter; transitional housing; car; park; campsite; and inadequate housing, including no running water, electricity, or adequate space)

NOTE: If you checked "No" to the temporary living arrangement, you may STOP here. If you checked "Yes", please continue to the next section.

Section B

Name of the parent/guardian/adult caring for the student: _____

Relationship to the student: _____

If the address you provided in section A is based on a temporary living arrangement, is it due to loss of housing or economic hardship? Yes ☐ No ☐

Please place an "X" in each box that best describes where the student sleeps at night.

- ☐ In a place that does not have windows, doors, running water, heat, electricity, or overcrowded
- ☐ Staying with a friend or relative because of loss of housing, economic hardship, or similar reason
(Example: eviction, foreclosure, fire, flood, lost job, divorce, domestic violence, kicked out by parents, ran away from home)
What date did you begin staying here? _____
- ☐ In a shelter/transitional housing program (name of agency): _____
What date did you begin staying here? _____
- ☐ In an unsheltered location (e.g. tent, vehicle, abandoned building, streets, campground, park, bus/train station, or similar place)
Provide the main cross streets of this unsheltered location: _____
- ☐ In a hotel/motel (name of hotel/motel & address) _____
What date did you begin staying here? _____
- ☐ With an adult that is not a parent or court appointed legal guardian
- ☐ Alone, not in the care of a parent or court appointed legal guardian
- ☐ None of the above (Please explain): _____

The following signature certifies that the information provided above is accurate. False claims about living situations may affect enrollment.

Signature of Person Providing Information
Parent/Legal guardian/Caregiver/Student

Date

For School Use Only

Please note, the student's cumulative file should not include a copy of this form. **Do not make copies of this form.** If Section B is filled out, please notify the LEA Homeless Education Liaison, and provide the original form to them.

Name of school site personnel who enrolled the student: _____

Please check the housing types that apply:

Sheltered ☐ Doubled-up ☐ Unsheltered/FEMA/Substandard ☐ Hotel/Motel ☐

Unaccompanied youth: Yes ☐ No ☐ Transportation to school of origin needed: Yes ☐ No ☐

Date received
by Homeless
Liaison

If you have any questions or believe you qualify for the McKinney-Vento Education Assistance Program, please call NAA's McKinney-Vento Liaison at (928) 536-4222 x 3.

CONTACTS

Name	Title/Department	Email	Phone
Nichole Sellers	Executive Director/ District Matters	nsellers@naacharter.org	928-536-3920 OR 928-536-4222 x 4
Lydia Humphries	Campus Manager/ SPED	lhumphries@naacharter.org	928-536-4222 x2
Joshua Lagesse	Outreach Coordinator/ McKinney Vento Internships	jlagesse@naacharter.org	928-536-4222 x 3
Dani David	Transportation	ddavid@naacharter.com	928-536-4222 x5

Notice of Nondiscrimination

Career Development Inc dba Northern Arizona Academy does not discriminate on the basis of sex and prohibits sex discrimination in any education program or activity that it operates, as required by Title IX and its regulations, including in admission and employment.

Inquiries about Title IX may be referred to Career Development Inc dba Northern Arizona Academy Title IX Coordinator, the U.S. Department of Education's Office for Civil Rights, Denver Office Office for Civil Rights U.S. Department of Education Cesar E. Chavez Memorial Building 1244 Speer Boulevard, Suite 310 Denver, CO 80204-3582 Telephone: 303-844-5695 FAX: 303-844-4303; TDD: 800-877-8339 Email: OCR.Denver@ed.gov or both. Career Development Inc dba Northern Arizona Academy Title IX Coordinator is Lydia Humphries 1300 Centennial Blvd Taylor, AZ 85939 lhumphries@naacharter.org 928-536-4222.

Career Development Inc dba Northern Arizona Academy nondiscrimination policy and grievance procedures can be located at <https://naacharter.org/> at the bottom of the home page.

To report information about conduct that may constitute sex discrimination or make a complaint of sex discrimination under Title IX, please refer to <https://naacharter.org/> or file your complaint via mail at Career Development Inc. PO BOX 125 Taylor, AZ 85939 or email at lhumphries@naacharter.org or in person at 1300 Centennial Blvd Taylor, AZ 85939.