



## Southgate Academy Onsite Campus Support Application

Governor Ducey's Executive Order 2020-51 requires our district to provide supervision for students "...who need a place to go during the day...". Parents who require this service must complete this form and return it to the school where their child is enrolled.

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Requesting Onsite Services for the Week of: \_\_\_\_\_

Student Name (print): \_\_\_\_\_

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

Address: \_\_\_\_\_

Parents' Names (print): \_\_\_\_\_

Parents' Phone Numbers: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Why does your child need this service? (choose one or more)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Special Education Student | <input type="checkbox"/> In Foster Care    | <input type="checkbox"/> No Internet Access at Home |
| <input type="checkbox"/> McKinney-Vento            | <input type="checkbox"/> Child Care Issues | <input type="checkbox"/> English Language Learner   |

I have read and understand the Terms and Conditions for this service and agree to adhere to these rules.

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

Parent Name (print): \_\_\_\_\_

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