



Registration Packet

2024 – 2025

Tucson Youth Development, Inc.
District Administration
1901 N. Stone Avenue
Tucson, AZ 85705



ACE Charter High School
1929 N. Stone Avenue
Tucson, AZ 85705
(520) 628-8316



YouthWorks Charter High School
1915 E. 36th Street
Tucson, AZ 85713
(520) 495-4113



Required Documents for Enrollment

We request the following documents for enrollment:

1. Birth Certificate (original or certified copy) or one of the following (required):
 - Baptismal Certificate
 - Application for Social Security number
 - Original school records
 - Letter from the authorized representative of an agency that has custody of the student
2. Immunization Records (required to attend school)
3. Proof of Residency (required)
4. High School Transcripts/Proof of Promotion
5. Proof of Guardianship if student does not reside with custodial parent (required)
6. Testing Records
7. Withdrawal Form

Emergency Contact 1		
Last Name	First Name	Relationship:
Cell Phone () -	Home Phone () -	Work Phone () -
Emergency Contact 2		
Last Name	First Name	Relationship:
Cell Phone () -	Home Phone () -	Work Phone () -
Emergency Contact 3		
Last Name	First Name	Relationship:
Cell Phone () -	Home Phone () -	Work Phone () -
Emergency Contact 4		
Last Name	First Name	Relationship:
Cell Phone () -	Home Phone () -	Work Phone () -

PLEASE ANSWER THE FOLLOWING QUESTIONS

- Have you been expelled from a school? NO YES
If Yes provide school name and location: _____

- Does student have a juvenile record? NO YES
If Yes provide the name and phone number of YOUR Probation Officer. Include the type of offense you were apprehended for.

Other Information

- How did you hear about ACE/Youthworks Charter High School? _____
- Who has legal custody of the student (Provide full name) _____
- Is there a joint custody or parenting plan in effect? NO YES *(if yes, plan must be on file with school)*
- Is there a restraining order in effect? NO YES *(if yes, a copy must be on file with school)*

Language

- What is the primary language used in the home regardless of the language spoken by the student?
 English Spanish Other_____
- What is the language most often spoken by the student:
 English Spanish Other_____
- What is the language that the student first acquired:
 English Spanish Other_____

Health Information

STUDENT NAME: _____ DOB: _____

Check here if your child DOES NOT have any health issues (sign at the bottom)

HEALTH CONCERNS/HEALTH HISTORY:

My child has a LIFE-THREATENING health condition*:

- If your child has health concerns, please check all current health conditions below (and fill in all applicable blanks). Parent/Guardian is responsible for notifying the school of new or existing health concerns and for providing the school with any medication or equipment that the student will require during the school day.
- Please contact the office manager to discuss your child's needs.

ALLERGIES

Seasonal Medication Allergies: _____ Bee Insect: _____
 Food: _____ Other: _____
 Reaction: Anaphylaxis Local Swelling Hives/Rash Other: _____
Treatment: *EpiPen* requires action plan/permit Other: _____
 Needs medication at school requires action plan/permit

ASTHMA

Treatment: *Carries inhaler (permit required) Other: _____
 My child was diagnosed with asthma but no longer uses an inhaler

DIABETES

*Type I (takes insulin) Insulin Pump Pen Syringe
 Type II (diet/exercise/medication controlled) My child is independent in diabetic care
 My child needs help with: _____

EMOTIONAL/BEHAVIORAL/PsYCHOLOGICAL/DEVELOPMENTAL

ADD ADHD Anxiety Asperger's Autism Bipolar Depression Developmental Delay Mood Disorder
 OCD ODD Post Traumatic Stress Disorder Schizophrenia Other: _____

SEIZURES* (please contact the school office manager to discuss your child's seizures and the need for a seizure action plan)

OTHER MEDICAL ISSUES (if you check any conditions below please explain in space provided)

Activity Restriction Bowel/Bladder Chromosome/Genetic Gastrointestinal Migraines Skin Condition
 Birth Defect Cancer Concussion Bleeding Disorder Heart Condition Neurological Special Diet
 Cerebral Palsy Endocrine Hypertension Physical Disability Other: _____

HEARING/VISION

Known hearing loss (explain): _____
 Hearing Aid Glasses/Contacts
 Other: _____

MEDICATION* (obtain medication permit from school Office Manager)

Medication taken at home
 Medication to be given at school * (permit required)

It is the responsibility of the parent/guardian to notify the school if any changes occur in their child's health status.

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____

Date: _____

McKinney-Vento Regulations

If your living arrangement is both temporary and the result of economic hardship, you may qualify for services under the McKinney-Vento Act. The purpose of this law is to provide academic stability for students of families in transition. You may want to talk with the ACE Charter High School Homeless Education Liaison if your family's temporary living arrangement is one of the following:

- You are living with friends or relatives, or moving from place to place, because you cannot currently afford your own housing.
- You are living in a shelter or a motel.
- You are living in a Transitional Housing Program or you are living in housing without water or electricity.
- You are living in a place not considered traditional "housing", like a car or a campground.
- You are a student living on your own (in a similar situation) without a parent or legal guardian.

*A student may qualify as an "unaccompanied youth" if he or she is living with someone who is not a parent or guardian, or if he or she is moving from place to place without a parent or guardian.

Children who qualify under McKinney-Vento have the right to:

Attend the school they were attending when their family was forced to move to a temporary address because of economic hardship, even if that school is in another school district. The choice must be a reasonable one that is in the best interest of the children involved. Check with the district Homeless Education Liaison if you are not sure.

- ◆ Attend the school closest to where they are being sheltered.
- ◆ Stay in this school for the duration of the school year if their families are forced to move to another temporary address because of economic hardship.
- ◆ Receive assistance with transportation to attend school while they are being temporarily housed.
- ◆ Start school immediately while people at school help families obtain school and immunization records or other documents necessary for enrollment.
- ◆ Enroll in school without having a permanent address.
- ◆ Participate in the same programs and services that other students participate in.
- ◆ Receive Title 1 services, including free breakfast and lunch.

If you feel your family may be eligible under the McKinney-Vento Homeless Assistance Act, please contact the **McKinney-Vento Liaison @ 520-623-5843 or email at executivedirector@tucsonyouth.org**

McKinney-Vento Act, Title X

This questionnaire is intended to address the McKinney-Vento Act, Title X, Part C of No Child Left Behind. Answers to these questions will help determine services a student may be eligible for. See the attached page for a description of the McKinney-Vento Act. Filling out this questionnaire is voluntary.

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

If you answered "NO" to both of these questions you may stop here. Thank you.

Responses to the rest of this page are also voluntary and will tell us that you are interested in possible services under McKinney-Vento. If you answered "yes" to the questions above, please fill out the remainder of this form. You may fill out one form for all of your children.

Names of adults in the home: _____

Name of School	Name of Student	Grade	Address	Phone Number

1. Where are these students presently living? (Check one box.)

- Double Up with relatives or friends
- In a Transitional Housing Program
- In a Motel
- In a Shelter
- Moving from place to place
- In a place not considered traditional "housing" (campground, car, public place, etc.)

2. Do you also have pre-school children at home? Yes No

3. Are you a high school student who is currently living on your own due to hardship?
Unaccompanied youth also qualify for services under this law. Yes No

Signature

Date



**State of Arizona
Department of Education
Student Directory Information Release Form**

During the school year, school district or charter school staff members may compile non-confidential student directory information specified below.

According to state and federal law, the below-designated directory information may be publicly released to the educational, occupational or military recruiting representatives without your permission. If the district governing board or charter school governing body permits the release of the below-designated directory information to persons or organizations who inform students of educational or occupational opportunities, by law the district or charter operator is required to provide the same access on the same basis to official military recruiting representatives for the purpose of informing students of educational and occupational opportunities available to them, unless you request in writing that the school not release the student's information without your prior signed and dated written consent. If you do not object to the release of any or all of the below-designated information in writing, then the district/charter operator must provide military recruiters, upon request, directory information about the student.

If you do not want any or all of the below-designated information about your son/daughter to be released to any person or organization without your prior signed and dated written consent, you must notify the district/charter in writing by checking off any or all of the rejected information, signing the form at the bottom of this page, and returning it to the principal within two (2) weeks of receiving this form, or October 31st, whichever occurs first. If the school district or charter school does not receive this form within the prescribed time, it will be assumed that your permission is given to release your son/daughter's designated directory information.

Please return to your child's School Administrator:

I **DO** consent to military release.

I **DO NOT** consent to military release

I **DO** consent to educational release.

I **DO NOT** consent to educational release.

I **DO NOT** want any information I have indicated below, concerning my child, to be designated as directory information and released to any person or organization without my prior written consent:

- | | |
|---|---|
| <input type="checkbox"/> Name | <input type="checkbox"/> Enrollment Status (E.G. part time or full time) |
| <input type="checkbox"/> Telephone Listing | <input type="checkbox"/> Date and Place of Birth |
| <input type="checkbox"/> Address | <input type="checkbox"/> Dates of Attendance |
| <input type="checkbox"/> Electronic Mail Address | <input type="checkbox"/> Weight and Height (members of athletic teams) |
| <input type="checkbox"/> Photograph | <input type="checkbox"/> Most Recent Educational Agency or Institution Attended |
| <input type="checkbox"/> Grade Level | <input type="checkbox"/> Major Field of Study |
| <input type="checkbox"/> Honors and Awards Received | <input type="checkbox"/> Participation in Officially Recognized Activities/Sports |

Parent/Guardian Signature: _____ **Date:** _____

School Name: _____

STUDENT DIRECTORY INFORMATION RELEASE FORM

Student Name: _____

DIRECTORY INFORMATION

According to state and federal law, the below-designated directory information may be publicly released to the educational, occupational or military recruiting representatives without your permission. If Tucson Youth Development schools permit the release of the designated directory information below to persons or organizations who inform students of educational or occupational opportunities, by law Tucson Youth Development schools are required to provide the same access on the same basis to official military recruiting representatives for the purpose of informing students of educational and occupational opportunities available to them, unless you request in writing that the school not release the student's information without your prior signed and dated written consent. If you do not object to the release of any or all of the designated information below in writing, then Tucson Youth Development schools must provide military recruiters, upon request, directory information about the student.

If you do not want any or all of the below-designated information about your son/daughter to be released to any person or organization without your prior signed and dated written consent.

Please mark unless you direct otherwise by checking the box below:

- I DO** RELEASE MY CHILD'S DIRECTORY/MEDIA INFORMATION. By selecting this option, I understand that my child's name and/or photo **will** be published.
- I DO NOT** RELEASE MY CHILD'S DIRECTORY/MEDIA INFORMATION. By selecting this option, I understand that my child's name and/or photo **will not** be published (to the press, general public or to third parties such as universities and colleges).

REQUESTS BY MILITARY RECRUITERS

- I DO** CONSENT TO MILITARY RELEASE
- I DO NOT** CONSENT TO MILITARY RELEASE

FIELD TRIP CONSENT:

- I DO** give consent to ACE Charter High School for my student to participate in school-sponsored trips during which transportation will be provided.
- I DO NOT** give consent to ACE Charter High School for my student to participate in school sponsored trips during which transportation will be provided.

(Parent/Guardian Signature)

(Date)