



Alex Horton
School Principal
2616 E. Greenway Road
Phoenix, AZ 85032
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<http://www.crestviewcollegeprep.com>

THE LEONA GROUP ARIZONA
A New Kind of Public School



Chartered by the Arizona School Board for Charter Schools

Checklist For Completing Enrollment Packet

- Read entire packet
- Obtain copies or originals of the following:
 - Immunization Records
 - Social Security Card
 - Birth Certificate
 - Recent Photo
 - Unofficial Transcripts
 - Withdrawal Slip
 - IEP/ AZELLA Scores
 - 8th Grade Diploma or Certificate (if applicable)
 - Copy of Custody Paper (if applicable)
- Complete, sign, and date Student Enrollment Form
- Complete, sign, and date Intent to Enroll Form
- Complete, sign, and date Home Language Survey
- Complete, sign, and date Consent for Medical/Dental Emergency Treatment and Medical Information
- Read, sign, and date Parent/School Compact (both student and parent/guardian signature required)
- Complete, sign, and date Permission Form
- Complete, sign, and date Athletics Acknowledgement & Assumption of Risk & Release Form
- Read and sign Student/Parent Internet Use Policy
- Read and sign Title 1 Parent Involvement Policy
- Complete, sign, and date Request For Release of Student Records Form
- Complete, sign, and date Records Request for Special Services Form
- Complete, sign, and date Student Residency Questionnaire
- Keep the School Calendar for your records
- Call **602-765-9555** to schedule an interview for the student and the parent/guardian to meet with the school principal. Bring all documentation with you to the interview.
- New student enrollment is conditional upon a student/parent interview by an administrator and completion of a student file with the items listed.
- Admission is open to all students ages fourteen through twenty-one with documentation that they have completed the 8th grade. Students unable to provide 8th grade documentation shall be referred to the principal for review and consideration.



Crestview College Preparatory High School



SAIS ID: _____

Enrollment Form for 2011-2012

*For re-enrollment within 2011-2012

Student Information

Last Name: _____ First Name: _____ Middle Name: _____

Current Age: _____ Date of Birth: _____ Month: _____ Day: _____ Year: _____

Gender: Female Male Have you ever attended this school? Yes No

Race: American Indian/Alaskan Native, Asian, Black or African American, Native Hawaiian or Pacific Islander, White. Is Ethnicity Hispanic or Latino? (Circle) Yes No

School year student was first a freshman? 2011-2012, 2010-2011, 2009-2010, 2008-2009, Before 2008

Is the student pending expulsion or long term suspension? YES NO

Last School Attended: _____ Last Date of Attendance: _____

Has the student ever been identified for and/or placed in a special education program? Yes No

If yes, does the student have a current IEP? (Please bring to enrollment interview) Yes No

Student's Place of Birth? City: _____ State: _____ Country: _____

What is the primary language used in the home regardless of the language spoken by the student? _____

What is the language most often spoken by the student? _____ What is the language that the student first acquired? _____

Has the student attended school in the United States for more than 3 years? YES NO

Parent/Guardian Information

Primary/mailling contact

Last Name: _____ First Name: _____ Relationship to Student: _____

Mailing Address: _____ Apt/Lot Number: _____

City: _____ State: _____ Zip Code: _____ Occupation: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email Address: _____ Student Email Address: _____

Lives with Contact? Yes No Has Legal Custody? Yes No OK to Pickup? Yes No Receives Report Cards Yes No

Secondary Contact

Last Name: _____ First Name: _____ Relationship to Student: _____

Mailing Address: _____ Apt/Lot Number: _____

City: _____ State: _____ Zip Code: _____ Occupation: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email Address: _____

Lives with Contact? Yes No Has Legal Custody? Yes No OK to Pickup? Yes No Receives Report Cards Yes No

Other Emergency Contact

Last Name: _____ First Name: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____ OK to pick up? Y N

I AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Parent/Guardian Signature _____ Date _____

*As I re-enroll my student: _____, I acknowledge the information above has not changed and is still current. (student name)

Parent/Guardian Signature _____ Date _____

Interviewer Initials: _____ Date: _____ Official Entry Date: _____ Entry Code: _____ Session: Morning Afternoon Night Block: 1 2 3 4 Data Entered into Schoolmaster by Initials: _____ Date Entered into Schoolmaster: _____ Copy to SPED? _____

Intent to Enroll

Crestview College Preparatory High School
2616 E. Greenway Rd., Phoenix, AZ 85032
School Year: 2011-2012

Student Name:

First: _____ Middle: _____ Last: _____

Date of Birth (mm/dd/yyyy):

Grade you will be in when returning from summer vacation: 9 10 11 12

(Example: you are in 9th grade this year, after summer vacation will start in 10th grade).

Last School of Attendance:

School Name: _____ City: _____ State: Arizona

**Special Education Category &
Service Type (if applicable):**

English Language Learner : Yes/No

If you are not planning on returning for the 2011/2012 school year, please explain.

Graduating

Transferring to another school. School Name: _____

Other: _____

Parent/Guardian Name: _____

Parent/Guardian Address: _____ Phone # _____

Signature of Student / Parent/ Guardian: _____
(over 18)



THE LEONA GROUP, L.L.C. • *A new kind of public school*™

Chartered by The Arizona State Board for Charter Schools



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 _____

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.

Crestview College Preparatory High School

CONSENT FOR MEDICAL/DENTAL EMERGENCY TREATMENT AND MEDICAL INFORMATION

In the event of a medical emergency, we will attempt to contact the primary guardian first, and then the secondary guardian, both listed on the Enrollment Form. In some circumstances, it may be necessary to seek medical treatment before they can be reached. Your permission is needed for your child to receive emergency treatment should a medical emergency occur at school. Please complete the following emergency medical and insurance information.

- Yes, I give permission for my child to receive emergency medical treatment by authorized pre-hospital personnel and members of the hospital staff, as may, in their professional judgment be necessary or in the best interest of my child. I hereby acknowledge that no guarantees have been made to me as to the effect of such examinations or treatment on the child's condition. I also acknowledge that I am responsible for all reasonable charges in connection with care and treatment rendered during this period.

Hospital Preference			
Medical Insurance Carrier		Policy #	
Family Physician Name		Phone #	
Dental Insurance Carrier		Policy #	
Family Dentist Name		Phone #	
Please use this space to explain any special procedures or requests:			

- No, I do not give permission for my child to receive emergency medical treatment.

Please use this space to explain any special procedures or requests:			
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EMERGENCY CONTACT NAME AND PHONE NUMBER

Emergency Contact Name (other than those listed above). This person will be contacted only if the primary and secondary guardians are unavailable.	
Emergency Contact Phone Number	

MEDICAL/ALLERGY INFORMATION

Please list any existing medical problems
Please list any known allergies:

CONSENT FOR PRESCRIPTION AND OVER-THE-COUNTER MEDICATION

The office staff has some over-the-counter medication that can be given to students for common ailments. They cannot and will not distribute any more than the recommended dosages listed on the packages.

- Yes, I give permission for my child to receive over the counter pain reliever from the school office staff (i.e. non-aspirin pain reliever, aspirin, anti-acids, cold & flu relief).
- No, I do not give permission for my child to receive over the counter pain reliever.

I understand that if my student needs medication, prescription or anything other than the recommended dosage for over-the-counter medication, the following stipulations must be met:

1. Whether a prescription drug or an over-the-counter drug, the medication must come in the original container. The pharmaceutical label must be on the container of any prescription drug.
2. The parent must provide signed and written directions to the school regarding medication to be administered.
3. All medications shall be kept in the school office. When necessary, provisions may be made for students to carry asthma inhalers when accompanied by a doctor's note.

Legal Guardian Signature		Date	
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Crestview College Preparatory High School

Parent/School Compact

Crestview College Preparatory High School

The following Parent/School Compact, developed through the combined efforts of the parents, students, and staff of Crestview College Preparatory High School, outlines the goals, expectations, and shared responsibilities for the success of all our students.

School Environment

The School Will:

- The School will provide a safe, secure environment on a closed campus with adequate security (local law enforcement).
- The School will employ a staff that is well trained and certified in maintaining a safe, educational environment.

The Parents Will:

- The Parents will contact the school with any concerns over attendance, behavior or academic completion.
- The Parents will contact their individual student, during regular class hours, through the school office only.

The Students Will:

- Students will accept the responsibility of maintaining a safe, secure learning environment by accepting this code of conduct.
- Students will not use, sell, or participate in any illegal use of drugs, tobacco or alcohol.
- Students will avoid and refrain from all gang related activities: hand signs, clothing, jewelry, graffiti, or any other actions or behavior.
- Students will not gamble in any way shape or form – playing cards, dice, or any other related gambling material.
- Students will not carry weapons or any look-alikes or replicas of weapons.
- Students will have no phones, pagers, Discmans, Walkmans or any similar electronics in any class at any time.
- Students will not fight or participate in any confrontational behavior at any time with anybody.
- Students will attend classes on time and be permitted to leave campus with parent/guardian permission only.

Behavior and Participation

The School Will:

- The School will maintain a safe climate, with a positive atmosphere suitable for learning for all students.
- The School will provide students with a foundation for continuous learning.

The Parents Will:

- The Parents will reinforce mutual respect for all teachers, staff and other students.
- The Parents will reinforce appropriate dress for a learning environment (including clothing and jewelry).
- The Parents will monitor their student's attendance ensuring full attendance – 100%.
- The Parents will reinforce positive student behavior and participation involving any and all activities, possessions and actions.

The Students Will:

- Students will show respect to all teachers, all staff and all students at all times: No racism, foul language, obscene gestures, harassment, poor attitude or inappropriate behavior (see school environment above).

- Students will use appropriate language at all times: No obscenities, threats, harassment, or any other verbal abuses.
- Students will show positive behavior at all times: Attendance, participation, respect, positive attitude, gestures and posture.
- Students will dress appropriately for a learning environment at all times (professional reflecting maturity and modesty).

Academics and Curriculum

The School Will:

- The School will provide a challenging curriculum that is aligned to the Arizona Academic Standards.
- The School will promote student achievement and success addressing all learning styles and accommodations.
- The School will employ highly trained professionals (teachers, administrators, and staff) who promote the highest quality in education.

The Parents Will:

- The Parents will support students in their learning and completion of all classes, all assignments and all class activities.
- The Parents will assist their students in seeking and receiving any additional help in order to achieve.
- The Parents will have access to all curricular materials and their student’s class work in order to monitor his or her progress.

The Students Will:

- Students will put in 100% effort in all class activities and all assignments at all times in order meet the requirements for graduation.
- Students will ask for help on any assignments they do not understand in order to achieve to their best ability.
- Students will attend any extra help or additional classes suggested by their teacher in order to achieve to their vest ability.
- Students will complete all classes and all assignments appropriately to the best of their ability.

Goals and Achievement

The School will:

- Provide every opportunity for students to achieve academic success.

The Parents Will:

- The Parents will provide every opportunity for their student to achieve academic success.

The Students Will:

- Students will take responsibility: to learn and achieve in every class and every course of study, to monitor their own grades and credits, and positively work toward graduation.

Student: _____

Date: _____

Parent: _____

Date: _____

Administrator: _____

Date: _____

CRESTVIEW COLLEGE PREPARATORY HIGH SCHOOL PERMISSION FORM

Please check the boxes of the items you would like to allow your student to participate in and sign below:

Permission to Participate in Off-Campus Activities

I give permission for my student to participate in school sponsored events during the school year. The school will take all reasonable precautions to insure against the possibility of accidents. I understand the school or the teacher in charge is not liable for accidents occurring to students either on school premises or while on school sponsored events as part of the school's activities.

Information concerning a specific school sponsored event, such as date, time of departure, destination, cost and means of transportation will be sent to the parent/guardian prior to each school sponsored event.

Permission to Release News Information

There may be times during the school year when the school, The Leona Group, news media or others wish to photograph or videotape your child at school for use in print, video, Internet or other communications.

I give my permission to the school to provide information concerning school activities with my child to the general news media. I also give my permission for my student's name, portrait, picture or voice to be used for display or in promotional material in a variety of mediums.

Permission to Use Artwork

There may be times during the school year when the school, The Leona Group, news media or others wish to use artwork created by your student at the school for use in print, video, Internet or other communications.

I give my permission to the school to use artwork created by my student for promotional purposes in a variety of mediums.

Student's Name (Please print)

Signature of Parent or Guardian

Date

ATHLETICS ACKNOWLEDGEMENT AND ASSUMPTION OF RISK AND RELEASE

Participant's Name _____

Your son or daughter would like to participate in Athletics at Crestview College Preparatory High School as a player. Crestview College Preparatory High School requires each Participant's parent or guardian (and if the participant is 18 years of age, the participant) to sign this Acknowledgment and Assumption of Risk and Release. By signing this document you:

(1) Acknowledge that injury may result from the participant's participation in the League;

(2) Represent to the League, The Leona Group Arizona, L.L.C., and their affiliates, schools, officers, employees, and members (the "Leona Group") that the participant has no injury, illness or other medical condition that would prevent him/her from participating in the League or that would make it dangerous, harmful, or inadvisable for him/her to do so;

(3) Assume the risk of and release and hold the Leona Group, and Crestview College Preparatory High School harmless from and against any and all liability for any physical or other injury or harm suffered by the participant during or as a consequence of participating in the League; and

(4) Agree that neither the Leona Group, nor the facility at which any game, practice or other League activity is held, nor any other person involved in organizing or conducting the League (including coaches, referees, and schools) shall have any liability or responsibility for any such injury or harm the participant may suffer.

I have carefully read, understand, and hereby agree to the above, and acknowledge that this agreement shall be binding on me, my spouse, my children, legal representatives, heirs, successors and assigns.

Signature of Parent or Guardian _____ Date _____

Signature of Participant (if 18 years of age or older) _____ Date _____

CRESTVIEW COLLEGE PREPARATORY HIGH SCHOOL
INTERNET USE POLICY

PRIOR TO RECEIVING AUTHORIZATION TO USE THE INTERNET, STUDENTS AND THEIR PARENTS/GUARDIANS MUST SIGN THE FOLLOWING PERMISSION AND CONTRACT DOCUMENT:

To be completed by all Parents/Guardians:

I give my permission for my son/daughter to participate in the use of the Internet, a worldwide telecommunications network. I realize that s/he will be able to access major networks throughout the world using the Internet. I understand that this access is designed and intended for educational purposes only. I also understand that the student will receive instruction in the appropriate use of this resource.

I realize the Internet contains material that is inappropriate for school purposes. I support the school's position that students are responsible for not accessing such material. Such unacceptable use of the network will result in the suspension of all privileges. I will not hold Crestview College Preparatory High School accountable for unsuitable materials acquired by the student through Internet usage for school.

I acknowledge that I have read the Internet Use Policy.

Student's Name: (PLEASE PRINT) _____

Parent or Guardian's Name: (PLEASE PRINT) _____

Parent or Guardian's Signature: _____

Date: _____

To be completed by all Students:

I will abide by the Internet Use Policy. I understand that the Internet contains material inappropriate for school use and, therefore, will take personal responsibility not to access this material. I recognize that it is impossible for Crestview College Preparatory High School to prevent access to all controversial materials, and I will not hold them responsible for materials found or acquired on the network. I further understand that any violation of the regulations in this policy is unethical and may constitute a criminal offense. Should I commit any violation, my access privileges may be revoked, and appropriate school discipline and/or legal action may be taken.

Student Name: _____ Grade: _____

Student Signature: _____

Date: _____ Witnessed: _____

American Charter Schools Foundation

dba

Crestview College Preparatory High School

Title 1 Parent Involvement Policy

A strong partnership between the school and home is essential if a quality educational program is to be provided to all students. Crestview College Preparatory is dedicated to the philosophy that parent involvement is integral to the success of each student. For this reason, parents are actively recruited as our partners for success. The parent involvement policy is developed during Title 1 meetings and through correspondence with parents. The policy is included in the Crestview College Preparatory Enrollment Packet and all incoming parents and students are expected to review and sign the policy. In order to make the policy easy to understand it is written as simple as possible.

Throughout the school year, Crestview College Preparatory holds multiple open houses and parent meetings to accomplish many things. These meetings introduce parents to Crestview and its staff, informs them of developments or changes in our NCLB Consolidated plan, our School-wide Title 1 program, and also informs them of opportunities to get involved by serving on committees or volunteering their time. Finally, parent's opinions and ideas are solicited in an effort to make Crestview College Preparatory a highly performing school of choice. Parents are welcomed to be involved in planning, reviewing and improving the Parent Involvement Policy, the School/Parent Compact, and the School-wide Plan. All parents of Crestview students are welcomed and have a right to be involved in all Crestview College Preparatory planning and programs.

Crestview College Preparatory believes that one of the keys for student success is parent involvement in school. For this reason, parents are expected to attend, at a minimum, one yearly meeting in the winter that highlights and evaluates our Title 1 program and disseminates information regarding AIMS testing and graduations. Additionally, parents are expected to read and sign the Parent/School compact upon their students enrollment, and support it throughout their students time at Crestview College Preparatory. Crestview takes its role in supporting parent involvement seriously. For that reason, Crestview College Preparatory is determined to provide information in an easy to understand format, have flexible meeting times with opportunities for additional meetings if requested and provide timely information regarding scheduled meetings.

In addition to the above assurances, Crestview College Preparatory assures that the following information will be disseminated at the annual Title 1 meeting.

- Information about Crestview College Preparatory's School-wide Title 1 program, Title 1 program requirements and Title 1 program eligibility.

- Title 1 funds may be used to pay reasonable and necessary expenses associated with parent involvement activities, including transportation and childcare costs, or home visit expenses to enable parents to participate in school related meetings and training sessions.
- Crestview will provide parents with a description and explanation of the curriculum used, the forms of academic assessment used to measure student progress and proficiency levels, and levels students are expected to meet in the form of Terra Nova, AIMS, and AZELLA scores. These can be explained by teachers in a conference or by the administrators.
- The state's academic standards will be posted on the walls during orientations, meetings and conferences.
- If needed, Crestview will provide assistance in understanding the state's academic content standards, the state achievement standards and the local assessments.
- They can monitor their child's progress and improve their achievement.
- Academic Advisors, ESL teachers, principals and special education teachers will be available where required.

Parent/Guardian: _____

Date: _____



Crestview College Preparatory High School

Alex Horton
2616 E. Greenway Road
Phoenix, AZ 85032
602-765-9555 P
602-765-8471 F

REQUEST FOR RELEASE OF STUDENT RECORDS

SOLICITUD PARA CEDER REGISTROS DEL ESTUDIANTE

Please forward the transcript(s) of/Por favor ceder los registros de:

(Student Name) (Nombre Del Estudiante) _____

Date of Birth/Fecha de nacimiento: _____ Who enrolled in grade/Quien se matriculo en el grado: _____

At Crestview College Preparatory High School on/ En Crestview College Preparatory High School el _____.

The parent or guardian who has signed below has been informed of this transfer request and grants permission for the below mentioned information to be sent. If this student is a special education student, please forward such records as well.

El Padre o guardián que ha firmado, ha sido informado de esta transferencia y otorga el permiso para que la información mencionada sea mandada. Si el estudiante es un estudiante de educación especial, por favor de mandar tales registros.

Please send the following information:

- AIMS Student Report Information
- Birth Certificate
- Official Transcript
- Letter of Promotion
- Test Scores (SELP/AZELLA Scores – oral, reading, writing)
- Official Withdrawal Form
- Grades to Date of Withdrawal
- Course Description/Catalog of Courses
- Immunization Records/Health Records
- Hearing and Vision Screening Results
- Discipline and Attendance Records
- Explanation of Grading/Credit System. (Please Indicate symbols designating Accelerated classes.)
- Special Education Records, including IEP's, Psychological Reports, etc.

Por favor de mandar lo siguiente:

- Reportes informativos de el examen AIMS
- Acta De Nacimiento
- Boleta oficial de calificaciones
- Carta de Promoción
- Puntuación en los exámenes SELP y AZELLA
- Forma oficial de retiro
- Calificaciones hasta la fecha de retiro
- Descripción de cursos/Catalogo de cursos
- Cartilla de vacunas/registro de salud
- Resultados de el examen de visión y audición
- Registros de asistencia y disciplina
- Explicación de sistema de calificaciones y créditos
- Registros de educación especial, incluyendo IEP's, informes psicológicos.

Please sign and complete the information below:/Por favor firmar y completar la información de abajo:

Name and address of last school attended/Nombre y dirección de la ultima escuela asistida:

School Name/Nombre de la escuela

Address/Dirección

City/Cuidad State/Estado Zip/Código Postal

Telephone Number/Numero de teléfono

Signature of Parent/Guardian/ Firma del padre o guardian

Date/Fecha

***State Law 15-828 Paragraph F States that NO SCHOOLS SHALL WITHHOLD RECORDS DUE TO FINANCIAL DEBTS. *New Federal Law 99.31- No parent or signature required for educational records to be sent to another educational agency.**

Crestview College Preparatory High School
RECORDS REQUEST FOR SPECIAL SERVICES
Student Services Department

Please forward the following records for _____
(Student Name)

DOB ____ / ____ / ____ to The Leona Group Arizona, Student Services Department.

This student enrolled at Crestview College Preparatory High School in the ____ grade

on _____ Student ID No. _____
(Last school attended)

List the three schools the student last attended, with the most current school listed first.

I give permission to:

(Name of schools last attended)

(Address)

(City, State, Zip Code)

To release the records checked below to The Leona Group Arizona, Student Services.

- | | |
|---|--|
| <input checked="" type="checkbox"/> Psycho-educational Evaluations | <input checked="" type="checkbox"/> Nurses Report |
| <input checked="" type="checkbox"/> Individual Education Plans | <input checked="" type="checkbox"/> Psychiatric Therapy Evaluations |
| <input checked="" type="checkbox"/> Eligibility Form | <input checked="" type="checkbox"/> Occupational Therapy Evaluations |
| <input checked="" type="checkbox"/> Multidisciplinary Evaluation Team Minutes | <input checked="" type="checkbox"/> Physical Therapy Evaluations |
| <input checked="" type="checkbox"/> Vision/Hearing Screening Results | <input checked="" type="checkbox"/> 504 Accommodations Plan |
| <input checked="" type="checkbox"/> Speech Evaluations | <input checked="" type="checkbox"/> Probation Officer's Reports |
| <input checked="" type="checkbox"/> Behavioral Plans | <input checked="" type="checkbox"/> Guardianship Papers |

Signature of Parent/Guardian

Date

Home Address

Telephone

Please Forward Records to:
The Leona Group Arizona
Student Services Department
7878 N. 16th Street
Phoenix, AZ 85020
Phone: (602) 953-2933 Fax: (602) 953-0831

CRESTVIEW COLLEGE PREPARATORY HIGH SCHOOL
The Leona Group Arizona
Student Residency Status
McKinney-Vento Eligibility Questionnaire

Name of Student _____ Date: _____

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(s):	Name(s):
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

1. Where is this student presently living? (Check one box.)
 - Doubled up with relatives or friends
 - 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? Yes ____ No ____
 Unaccompanied youth also qualify for services under this law.

RIGHTS OF HOMELESS STUDENTS

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

A student may be considered eligible for services as a "Homeless Child or Youth" under the McKinney-Vento Homeless Assistance Act if he or she is presently living:

- In a shelter, temporary shared housing, or transitional living program
- In a hotel/motel, campground, or similar situation due to lack of alternatives
- At a bus station, park, car, or abandoned building
- In temporary or transitional foster care placement

According to the McKinney-Vento Homeless Act, eligible students have rights to:

Immediate enrollment: Documentation and immunization records cannot serve as a barrier to the enrollment in school.

School Selection: McKinney Vento eligible students have a right to select from the following schools:

- The school he/she attended when permanently housed (School of Origin)
- The school in which he/she was last enrolled (School of Origin)
- The school in the attendance area in which the student currently resides (School of Residency)
- In Maricopa County, Thomas J. Pappas School

Remain enrolled in his/her selected school for the duration of homelessness, or until the academic year upon which they are permanently housed.

Participate in programs in which they are eligible, including Title I, National School Lunch Program, Head Start, Even Start, etc.

Transportation Services: A McKinney-Vento eligible student attending his/her School of Origin has a right to transportation to and from the School of Origin.

Dispute Resolution: If you disagree with school officials about enrollment, transportation, or fair treatment of a homeless child or youth, you may file a complaint with the school district. The school district must respond quickly and it must be a written response. During the dispute, the student must be immediately enrolled in the school and provided transportation until the matter is resolved. The Homeless Liaison will assist you in making decision, providing notice of any appeal process, and filling out dispute forms. You have the right to appeal a decision to the state level.

For more information, refer to <http://www.ade.az.gov/asd/homeless/> or contact:

Kristin Schaefer Homeless Liaison Crestview College Preparatory High School 2616 E. Greenway Road Phoenix, AZ 85032 602-765-9555	Mr. Frank Migali Homeless Education Coordinator Arizona Department of Education 1535 W. Jefferson Street Phoenix, AZ 85004 (602) 542-4963 frank.migali@azed.gov
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August

M	T	W	TH	F
1	2	3	4	5
8	9	10	11	12
15	16	17	18	19
22	23	24	25	26
29	30	31		

October

M	T	W	TH	F
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
31				

December

M	T	W	TH	F
			1	2
5	6	7	8	9
12	13	14	15	16
19	20	21	22	23
26	27	28	29	30

February

M	T	W	TH	F
		1	2	3
6	7	8	9	10
13	14	15	16	17
20	21	22	23	24
27	28	29		

April

M	T	W	TH	F
2	3	4	5	6
9	10	11	12	13
16	17	18	19	20
23	24	25	26	27
30				

Block 1

8/10/11 Start Block
 9/5/11 No School
 10/13/11 End Block

Block 2

10/18/11 Start Block
 10/25-10/27/11 AIMS- Writing/Reading/Math
 11/11/11 No School
 11/24-11/25/11 No School
 12/22/11 End Block
 12/23/11-1/9/12 Winter Break

September

M	T	W	TH	F
			1	2
5	6	7	8	9
12	13	14	15	16
19	20	21	22	23
26	27	28	29	30

November

M	T	W	TH	F
	1	2	3	4
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
28	29	30		

January

M	T	W	TH	F
2	3	4	5	6
9	10	11	12	13
16	17	18	19	20
23	24	25	26	27
30	31			

March

M	T	W	TH	F
			1	2
5	6	7	8	9
12	13	14	15	16
19	20	21	22	23
26	27	28	29	30

May

M	T	W	TH	F
	1	2	3	4
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
28	29	30	31	

Block 3

1/10/12 Start Block
 1/16/12 No School
 2/20/12 No School
 2/28-2/29/12 AIMS- Writing/Reading
 3/16/12 End Block/Alt Schedule
 3/19-3/26/12 Spring Break

Block 4

3/27/12 Start Block
 4/10-4/11/12 AIMS- Math/Science
 5/28/12 No School
 5/30/12 End Block/Alt Schedule
 5/31/11 Graduation 6:30PM



2616 E. Greenway Rd.
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2011-2012 School Year Calendar

	No School
	Parent Conferences
	AIMS Testing
	Block Begins
	Block Ends *
	Alternative Schedule
	Graduation

*Please note the last day of the block is an alternative day.

Daily Schedule

1st	8:00-9:25
2nd	9:30-10:55
3rd	11:00-12:25
Lunch	12:25-12:55
4th	12:55-2:20
5th	2:25-3:50

Alternative Schedule

1st	8:00-9:05
2nd	9:10-10:15
3rd	10:20-11:25
4th	11:30-12:35
Lunch	12:35-1:00
5th	1:00-2:05