



Attendance Verification

For students transferring from an Arizona public or charter school

One form must be completed for each student

Applicant Information:

Student's Name: _____

Parent's Name(s): _____

Parent's Phone: _____ Email: _____

Public School Information:

Arizona Public School attended: _____

Public School address: _____

Public School Phone number: _____

To be filled out by Arizona public school official:

Student's Name:	
Public School:	
Student's Start Date of PRIOR School Year: (if applicable)	Student's Last Day of PRIOR School Year: (if applicable)
Student's Start Date in CURRENT School Year: (if applicable)	Student's Last Day in CURRENT School Year: (if applicable)
Student completed one full semester last academic year: <input type="checkbox"/> Yes <input type="checkbox"/> No Student was enrolled for 90 days during last academic year: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Form Completed by (name of school employee, title):	
Signature of School Employee:	Date:

