

## PRIVATE SCHOOL AFFIDAVIT OF INTENT

STUDENT INFORMATION (LAST, FIRST, MIDDLE) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ SCHOOL DISTRICT # \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PREVIOUS SCHOOL \_\_\_\_\_

PARENT/GUARDIAN INFORMATION \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

**PRIVATE SCHOOL INFORMATION:**

PRIVATE SCHOOL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**ARIZONA STATE PRIVATE SCHOOL LAWS FOR REGISTRATION AS PRESCRIBED BY THE ARIZONA REVISED STATUTES:**

**15-802 A:** Every child between the ages of six and sixteen years shall attend a school and shall be provided instruction in at least the subjects of reading, grammar, mathematics, social studies and science. The person who has custody of the child shall choose a public, private or charter school or a homeschool as defined in this section to provide instruction.

**Parents are not required to submit an Affidavit if the child has an Empowerment Scholarship Account Program(ESA).**

**AUTHORIZATION:**

\_\_\_\_\_  
 PARENT/GUARDIAN SIGNATURE

Subscribed and sworn (or affirmed) before me this: \_\_\_\_\_ STATE OF: \_\_\_\_\_  
 \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. COUNTY OF: \_\_\_\_\_

\_\_\_\_\_  
 NOTARY SIGNATURE

NOTARY SEAL

FOR OFFICE USE ONLY

**Submit this form either by mail or in person to the Private School Services Division at the address listed on the bottom of this page.**