



Santa Cruz County School Superintendent

Alfredo I. Velásquez

AFFIDAVIT OF INTENT

CHILD'S LAST NAME FIRST MIDDLE

DATE OF BIRTH GRADE MALE FEMALE

The above named child is attending home school OR a regularly organized private school.

NAME (S) AND ADDRESS (ES) OF PERSON (S) WHO HAVE CUSTODY OF THE CHILD:

Name

Name

Physical address

Physical address

Mailing address

Mailing address (if different from above)

City State Zip

City State Zip

Phone numbers

Phone numbers

PUBLIC SCHOOL DISTRICT OF RESIDENCE OR

NAME OF PRIVATE SCHOOL CHILD IS ATTENDING

Address of private school

City State Zip

I (we) elect to not begin formal education until this child reaches eight years of age.

If child is attending home school, after signing and notarizing this form, return the original to:

Santa Cruz County School Superintendent
2150 N. Congress Drive Suite 107
Nogales, Arizona 85621
Telephone 520-375-7940

If student is enrolled in a private school, after signing and notarizing this form, return the original to the private school named above.

PRIVACY NOTICE:

The undersigned expressly prohibits the release of any and all information contained in this form including directory information as defined in 20 U.S.C. § 1232g (a) (5) (B) and ARS §15-141.

For Private School and Home School Parents:

I understand that an Affidavit of Intent shall be filed within thirty days From the time the child begins to attend a private school or home school and is not required thereafter unless the private school or the home school instruction is terminated and then resumed. I understand the child must be instructed in at least the subjects of reading, grammar, mathematics, social studies and science. The person who has custody of the child shall notify the County School Superintendent within thirty days of the termination that the child is no longer being instructed at a private school or a home school. If the private school or home school instruction is resumed, the person who has custody of the child shall file another Affidavit of Intent with the County School Superintendent within thirty days. (ARS §15-802.C)

In addition, for Home School Parents: I understand a certified copy of the child's birth certificate or other reliable proof of the child's identity and age shall also be filed in the County School Superintendent's office. (ARS §15-828.3.B)

I understand that a child who re-enrolls in a kindergarten program or grades one through twelve in a public school after receiving instruction in a home school program shall be tested in order to determine the appropriate grade level for the educational placement of the child. (ARS 15-745.B)

State County of

SUBSCRIBED AND SWORN TO before me this

day of 20

SIGNATURE OF NOTARY PUBLIC

Signature of person having custody of the child

My commission Expires:

For Office use only

Notary Stamp