## **PRIVATE SCHOOL AFFIDAVIT OF INTENT**

Dr. Donald D. Covey – Maricopa County Superintendent of Schools Maricopa County Education Service Agency

## **STUDENT INFORMATION:**

NAME:	DATE OF BIRTH:		
SCHOOL DISTRICT OF RESIDENCE:			
PARENT/GUARDIAN INFORMATION:			
NAME:	TELEPHONE NUMBER	R:	
HOME ADDRESS:	CITY:	ZIP:	
PRIVATE SCHOOL INFORMATION:			
PRIVATE SCHOOL NAME:			
ADDRESS OF SCHOOL:	CITY:	ZIP:	
<ul> <li>15-802 A: Every child between the ages of six and sixteen year social studies and science. The person who has custody of the</li> <li>2. If the child will attend a private school or homeschool, file an school or is being provided with instruction in a homeschool. Th (a) The child's name.</li> <li>(b) The child's date of birth.</li> <li>(c) The current address of the school the child is attending.</li> <li>(d) The names, telephone numbers and addresses of the perso</li> </ul>	child shall choose a public, private or charter school affidavit of intent with the county school superintende affidavit of intent shall include:	or a homeschool as defined in this section to provide instruction	on.
PARENT/GUARDIAN SIGNATURE:			
Subscribed and sworn (or affirmed) before me this:	STATE OF:	NOTADV GEAL	
day of, 20	COUNTY OF:	NOTARY SEAL	
NOTARY SIGNATURE:			
Submit this form either by mail or in person to the Private School	ol Services Division at the address listed on the botto	m of this page.	

4041 N. Central Avenue, Ste. 1100, Phoenix AZ 85012 • Phone 602-506-3866 • Fax 602-506-3753 Homeschool Hotline 602-506-3144

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