

*Hackberry Elementary School District #3*

*Cedar Hills School  
9501 Nellie Drive  
Kingman, AZ 86401-8917  
Phone (928) 692-0013*

*Fax (928) 692-1075*



Kim Pattillo  
Administrator

Hackberry Mustangs

**Open Enrollment Application**

**Please Submitted To Hackberry Elementary School District #3 School as soon as possible, preferably by Feb. 1<sup>st</sup> of the School Year before your student attends.**

School Requested: \_\_\_\_\_ School Year: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current School: \_\_\_\_\_ Current District: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address \_\_\_\_\_

(Street)

(City)

(Zip)

Reason for seeking admission: \_\_\_\_\_

Either parent a Hackberry School District employee: \_\_\_ Yes \_\_\_ No Position: \_\_\_\_\_

Siblings currently attending this school: \_\_\_\_\_ Grade \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_

**Participated or needs to participate in any of the following programs:**

\_\_\_ ELL \_\_\_ Section 504 \_\_\_ Special Education (Has an IEP)

Previous Program Placement: \_\_\_ Inclusion \_\_\_ Resource \_\_\_ Self-Contained

**Is the applicant on or being considered for a long-term suspension (11+days) or expulsion?** \_\_\_ Yes \_\_\_ No

**Is the applicant under a condition imposed by court pursuant to A.R.S. 8-301?** \_\_\_ Yes \_\_\_ No

-If yes, is the applicant in compliance with condition? \_\_\_ Yes \_\_\_ No

**Previous schools the applicant has attended:**

Name of School(s)	Year(s) Attended	Address	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

