



ENROLL ARKANSAS Program Enrollment Form

Thank you for your interest in participating in the Enroll Arkansas program! This grant-funded project is designed to help public schools modernize their online enrollment process. By joining the program, your school will receive comprehensive support in managing family outreach and finalizing online enrollment details with direct integration into Arkansas' state-hosted eSchool system.

Please fill out the form below to begin the enrollment process.

Contact Information of the Person Submitting This Form

Full Name: _____

Title/Role: _____

Phone Number: _____

Email Address: _____

Relationship to School (e.g., Administrator, Enrollment Officer, etc.):

District/School Information

School District: _____

Schools in the Program: _____

Handbook URL: _____

Program Participation Agreement

Please download, sign, and return the [Data Agreement](#), which complies with the most recent Arkansas Student Data Privacy laws, along with the [Memorandum of Understanding \(MOU\)](#) and the Program Enrollment Form. The MOU must be signed

by your school's Superintendent/CEO in order for us to proceed. Once completed, send all documents to the contact designated at the bottom of this form.

Submission:

Date of Submission: _____

Submitted By (if different from contact above):

Thank you for your interest in the Enroll Arkansas program! We look forward to working with your school to improve the enrollment process and create a more efficient system for Arkansas students and families.

For any questions, please contact help@enrollarkansas.com or call (501) 492-4300.

Once you've completed the form, please email it to help@enrollarkansas.com.