



IMPLEMENTATION IN PUBLIC SCHOOLS

SUMMARY OF THE PROGRAM

On July 1, 2008, the Idaho Secretary of State began administering an Address Confidentiality Program (ACP). The goal of the ACP is to assist survivors of domestic violence, sexual assault, stalking, human trafficking or malicious harassment and who are attempting a fresh start for themselves and their children and/or incapacitated persons. This is done through the use of a mail-forwarding service and substitute address. In accordance with I.C. 19-5705, all state and local agencies are required to accept the substitute address as the actual address of the individual.

ACP SUBSTITUTE ADDRESS

The substitute address has no relationship to a participant's actual location. The substitute address can be used as the participant's residence, work and school address. The ACP address is a post office box that includes an authorization number. All participants will use the same post office box number, but will be assigned an individual authorization number.

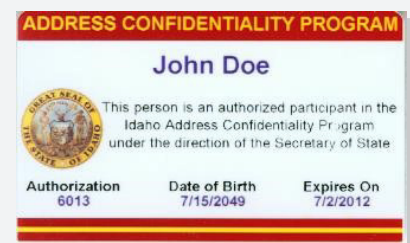


A school district shall accept the substitute address as the address of record and may verify student enrollment eligibility through ACP.

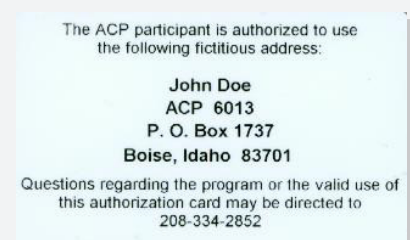
ACP IDENTIFICATION CARD

The ACP issues an identification card to each program participant. These are plastic cards and include the participant's name, date of birth, authorization number, expiration date and substitute address. Included on the back of the card is the telephone number of the ACP if you have questions regarding the program or the valid use of the card. When a participant presents his or her identification card, the school must accept the ACP substitute address as though it is the student's actual address.

School employees cannot require a participant to reveal his or her actual address. School employees are free to make a copy of the card to place in the student's records.



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ENROLLMENT ELIGIBILITY VERIFICATION

When a participant enrolls their child, school registration staff may contact the ACP office on the number listed on the back of the participant's identification card. ACP staff may request the following information:



1. Name of student
2. Student's birth date
3. Student's ACP Authorization number
4. School name and district number
5. School staff person's telephone number, fax number or email.

A Request for Verification of School Enrollment Eligibility Form will be faxed or emailed to the requesting party.

ACP staff will notify the school of eligibility findings verbally and/or in writing. This process may take a few days. If questions are raised regarding the student's eligibility, the ACP Coordinator will work directly with the school superintendent or a designee to resolve the matter.

STUDENT CORRESPONDENCE

The school will use the substitute address for sending 1st class correspondence to the participant and/or parent.

EMERGENCY CONTACT INFORMATION

As with any other student, the ACP participant should provide the school with emergency contact information including telephone numbers.

SCHOOL TRANSPORTATION

If a student requests or requires school-provided transportation, the ACP participant will provide drop-off and pick-up information to the school.

SCHOOL DIRECTORY

Unless notified otherwise, please presume that an ACP participant student has opted out of school directory listings.



Although there may not be a great number of participants in your district, their security needs will be great. Please use sensitivity and thoughtfulness when responding to their requests for confidentiality so they may continue to be safe in their new homes.

If you have additional questions, please contact the Secretary of State's office at **(208) 334-2852** or email **acp@sos.idaho.gov**.