

Target Population

Mission Statement: (Use only this space.)

	Grades Served Please remove any grades not being taught.	Total Number Served Enrollment cap at all campuses and in all grades combined.	Sites Number Operating
Year _____	K 1 2 3 4 5 6 7 8 9 10 11 12		_____
Year _____*	K 1 2 3 4 5 6 7 8 9 10 11 12		_____
Year _____*	K 1 2 3 4 5 6 7 8 9 10 11 12		_____

*The addition of grades will require an amendment request after the approval and signing of the contract.

School Calendar

Standard
 Extended School Year

Alternative (Please describe in 5 words or less)

Number of Instructional Days _____

Target Starting Date _____

School Calendar Description:

Complete the following information for each site indicated above. If planning more than one site, provide the following information for each site. Attach an additional page if necessary.

1. Specific boundary information (e.g. targeted 10 mile radius) on the planned location for your school:
2. Number of classrooms, offices, etc. necessary, along with total square footage, to implement your program as described:
3. If facility arrangements have been made, provide the information below:

Proposed School Name: _____

Site Address: _____

City: _____ State: _____ Zip Code: _____ County: _____