

Charter Applicant Eligibility Documentation

Proposal Overview Form

The Proposal Overview Form is part of Eligibility Determination and should be submitted.

Submitted documentation should include only the information requested below, saved in a single PDF file.

NONPROFIT INFORMATION			
Name of Nonprofit Applicant: (as registered with Louisiana Secretary of State)			
Application Type:	<input type="radio"/> Type 1	<input type="radio"/> Type 2	<input type="radio"/> Type 3 <input type="radio"/> Type 4
Operator Track:	<input type="radio"/> Virtual School Operator	<input type="radio"/> New Operator	<input type="radio"/> Experienced Operator
If applying to BESE for a Type 2 charter school, please indicate your eligibility pathway:			
<input type="radio"/> Local School Board Denial as a Type 1 or Type 3	<input type="radio"/> Current Type 1 or Type 3 appealing to become a Type 2	<input type="radio"/> Direct submission due to operation within a local school system in academic crisis, per Bulletin 111, section 4901	<input type="radio"/> Direct submission due to operating within a local district with DPS of "D" or "F"
If applying to BESE for a Type 2 charter school, submit as an attachment to this document the following applicable evidence:			
<ol style="list-style-type: none"> Evidence of the local school board not complying with the requirements of Bulletin 126 §306; Evidence of most recent charter application being denied by a motion or resolution of the local school board; Evidence of conditions that have been placed on it are unacceptable to the group; Evidence of the local school board has made no final decision in accordance with timelines established by BESE; Evidence that the local school system that the charter school intends to operate in is in academic crisis, as defined Bulletin 111, §4901; Evidence that the local school system that the charter school intends to operate in has received a letter grade designation of "D" or "F". 			

PRIMARY CONTACT INFORMATION	
Name:	
Address:	
Phone:	
Email:	

SCHOOL LEADER INFORMATION	
Proposed school leader name: (if identified)	
Proposed school leader current job/position:	

SCHOOL INFORMATION	
Proposed School Name:	
Opening Year (2024-2025 or 2025-2026):	
Grades served Year 1:	
Grades served at capacity:	

ENROLLMENT PROJECTION FORM

Provide the following information for each school included in this proposal. Specify the planned year of opening for each (duplicating the table as needed).

School Name:	
Proposed School Location: (include Parish)	
Admission Requirements, if any:	
Enrollment Preferences:	

GRADE LEVEL	NUMBER OF STUDENTS					
	Year 1:	Year 2:	Year 3:	Year 4:	Year 5:	Year at Capacity:
Pre-K						
K						
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
Minimum Enrollment						
Budgeted Enrollment						
Maximum Enrollment						

ENROLLMENT PLANS

What is your minimum operating enrollment? What adjustments to the budget, staffing, and/or academic model would be made to accommodate this minimum enrollment?

SCHOOL MANAGEMENT FORM

Do any of the following describe your organization or any of the school(s) proposed in this application?

<input type="radio"/>	Will contract or partner with an education service provider (ESP) or other organization to provide school management services. <i>If so, identify the provider:</i>
<input type="radio"/>	Will have a corporate partner as defined in LA R.S. 17.3991.1. <i>If so, identify the partner:</i>
<input type="radio"/>	Will reflect the conversion of an existing public school or new school operated as a charter between a local school board and BESE (Type 4 application). <i>If so, identify the school system:</i>
<input type="radio"/>	The applicant was denied by the local school district in the most recent cycle. <i>If so, please identify the district and date of denial and attach evidence of the motion on resolution.</i>
<input type="radio"/>	The applicant has previously participated in the BESE charter application process. <i>If so, please identify the year(s):</i>
<input type="radio"/>	Already operates schools in Louisiana or elsewhere in the US. <i>Indicate which state(s) below:</i>

Certification

I certify that I have the authority to submit this application and that all information contained herein is complete and accurate. I recognize that any misrepresentation could result in disqualification from the application process or revocation afterward. The person named as the contact person for the application is so authorized to serve as the primary contact for this application on behalf of the organization.

Signature of Application Primary Contact: <div style="font-size: 2em; color: #ccc; margin-top: 10px;">X</div>	Date:
Print Name & Title of Application Primary Contact:	

TEACHER ELIGIBILITY FORM

Louisiana state law requires that all groups submitting charter applications involve a minimum of three Louisiana teachers certified by the State Board of Elementary and Secondary Education (BESE) in the development of their application.

Please use this form to identify the certified teachers participating in the development of this application.

Also, please be sure to include a copy of current LA Teacher Certifications for the teachers listed.

	Full Name	Full Address	Email	Certificate Number
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

BOARD MEMBER ROSTER

Please list all the proposed board members for the nonprofit applying to open this school. In order to be eligible to apply, applicants are required to have at least three board members. State law requires a minimum of seven board members in order to execute a valid charter agreement and at all times that a charter school is operational.

Board members should have a diversity of professional skills and expertise in areas including education, organizational operations, community development, finance, law, and facilities/real estate.

- **Resumes:** Please include a current resume for all board members identified.
- **Background Checks:** All New Operators and Experienced Operators *not* currently operating a charter school in Louisiana must submit LA State Background checks for each board member identified with the submission of the full application.

Name of Nonprofit Applicant (as registered with Louisiana Secretary of State):

	Name	Street Address	Zip Code	Phone	Email	Expertise
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

