# **Charter Schools Institute logo small.jpg**

### PROPOSAL SUMMARY AND TRANSMITTAL FORM

| Proposed School Information | | | | |
| --- | --- | --- | --- | --- |
| **Charter School Name:** |  | | | |
| Education Corp. Name: |  | | | |
| Education Corp. Status: |  | Proposal Type: |  |
| School District (or NYC CSD): |  | Opening Date: |  | |

| Proposed Grades and Enrollment | | |  | Proposed Affiliations (if any) | |
| --- | --- | --- | --- | --- | --- |
| Charter Year | Grades | Enrollment |  | Charter Management Company (“CMO”): |  |
| Year 1 |  |  |  | CMO Public Contact Info (Name, Phone): |  |
| Year 2 |  |  |  |
| Year 3 |  |  |  | Partner Organization: |  |
| Year 4 |  |  |  | Partner Public Contact Info (Name, Phone): |  |
| Year 5 |  |  |  |

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| Lead Applicant Contact Information | | | | | | | | | | | | | | | | | |
| **First Lead Applicant Name:** | | | |  | | | | | | | | | | | | | |
| Applicant is a: | | Parent | Teacher | | School Administrator | | | | | District Resident | | | | Education Corp./Charter School | | |
| Organization Name: | | | |  | | | | | | | | | | | | | |
| Applicant Mailing Address: | | | |  | | | | | | | | | | | | | |
| Primary Phone #: |  | | | | | | Secondary Phone #: | |  | | | Email: | | | |  | |
| **Second Lead Applicant Name:** | | | | | | | |  | | | | | | | | | |
| Applicant is a: | | Parent | Teacher | | | School Administrator | | | | District Resident | | | Education Corp./Charter School | | | | |
| Organization Name: | | | |  | | | | | | | | | | | | | |
| Applicant Mailing Address: | | | |  | | | | | | | | | | | | | |
| Primary Phone #: |  | | | | | | | Secondary Phone #: |  | | Email: | | | |  | | |

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| List additional lead applicants in the “Other” section. | Not Applicable | Additional Applicants Listed in “Other” |

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| Media/Public Contact Information (required) | | | | | |
| Name: |  | Phone #: |  | Email: |  |

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| --- | --- | --- | --- | --- |
| Lead Applicant Signature | | | | |
| Signature: | |  | Date: |  |
| *By signing this Proposal Transmittal Form, the Lead Applicant certifies that the information contained in this proposal to establish a charter school pursuant to the New York Charter Schools Act with the State University of New York Board of Trustees is true and accurate to the best of his or her knowledge.* | | | | |
| Program Design | | | | |
| MISSION STATEMENT | | | | |
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| KEY DESIGN ELEMENTS | | | | |
|  | | | | |
| BRIEF OVERVIEW OF ACADEMIC PROGRAM | | | | |
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| School Management |
| MANAGEMENT STRUCTURE |
|  |
| ROLE OF CMO OR PARTNER(S) |
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| School Facility Plans |
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| Board Member Names and Biographical Summaries |
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| Other |
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