

Application and Enrollment Information Form

2019-2020

Name of Academy: _____

Academy Contact Person:

Name Phone

Title Email

Maximum enrollment as adopted annually by the Academy Board:

Charter Contract Total: _____

Re-Enrollment Period

Beginning Date: _____

Ending Date: _____

Open Enrollment Period

Beginning Date: _____

Ending Date: _____

Legal/ Public Notice

Newspaper: _____
Name of local newspaper of general circulation

Random Selection Drawing

Date: _____ Time: _____ Place: _____

Submission:

Please submit the completed form by **January 23, 2019**, to the Center via Epicenter, per the Master Calendar of Reporting Requirements.

For more information, please contact:

The Governor John Engler Center for Charter Schools
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Mount Pleasant, MI 48859
(989) 774-2100
www.TheCenterForCharters.org