

U.S. Department of Education Office of Innovation and Improvement (OII) CHARTER SCHOOL AUTHORIZER ANNUAL UPDATE

The National Charter School Resource Center and the U.S. Department of Education's Office of Innovation and Improvement are updating a national database of all charter authorizers and the schools they have chartered. This data update is designed to gather information about charter school closures and renewals for the database.

Answers to this data update and information gathered from public records will be posted at:

A <http://www.charterschoolcenter.org/>

Your participation in this data update is important to inform federal and state efforts to support and strengthen charter school authorizing.

We encourage you to complete this data update online. To do so, please go to:

<http://auth.charterschoolcenter.org/authorizerupdate>

If you have any questions, please contact the National Charter School Resource Center at: authorizerupdate@air.org or 919-636-9193.

OMB CONTROL NUMBER: 1855-0023

Authorized Schools

Step 1, Part 1: School List and Opening Date

1. Please review the information below and provide any missing information in the columns as indicated. You may update the first school year of student enrollment.

B 2. Please enter school status for each school.

a. If you authorize any schools that are not listed below, even if multiple schools are operating under a single charter, please add them by clicking on the “add a school” button below.

C b. If any schools listed in the table below are not currently authorized by you and have been mistakenly listed, please indicate them in the school status column.

D c. If any schools have been transferred to you, please indicate below by adding as a new school and indicating status as New School Authorized in 2012-13.

| School name | NCES ID (12-digit) | State School ID | State District ID | First school year of student enrollment (Example: 2005–06) | NOTE: This field is required for every school. School Status: Not under your oversight; Closed; New School Authorized in 2012-13; Existing School |
|-------------|--------------------|-----------------|-------------------|--|---|
| | | | | | E |
| | | | | | |
| | | | | | |

F Check here to add any schools missing from the schools list, including schools that have opened in the past year. Note: Saved information will be added to the school list in alphabetical order.

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
| | | | | | |

Step 1, Part 2: Renewal Information

G 1. We've pre-populated some of your information from last year. If it is incorrect, please enter correct the information.

Please check the box to confirm the information listed below is correct and you have no changes to make.

| School name | Final school year of previous charter term, if school is not in its first charter term (Example: 2010–11) | Final school year of current charter term (Example: 2014–15) | H Is the charter school currently in cautionary or remedial status? | H Does the school have a provisional charter? (i.e., a shortened charter term) | Is this school closed? If so, please complete Step 2 for each closed school. |
|-------------|---|--|---|--|--|
| | | | Y N | Y N | Y N |
| | | | Y N | Y N | Y N |
| | | | Y N | Y N | Y N |
| | | | Y N | Y N | Y N |
| | | | Y N | Y N | Y N |
| | | | Y N | Y N | Y N |
| | | | Y N | Y N | Y N |
| | | | Y N | Y N | Y N |
| | | | Y N | Y N | Y N |

Step 1, Part 3: School Characteristics

1. We've pre-populated some of your information from last year. If incorrect, please enter correct information.

I

Please check the box to confirm the information listed below is correct and you have no changes to make.

| School name | Is this school an alternative school?* | J If yes, describe population served. 1=Dropout prevention/recovery 2=Adjudicated youth 3=Homeless youth 4= Students in foster care 5=Pregnant or parenting teens 6=Credit recovery 7=Other (please describe) | K Is this a cyber or virtual school? (<i>All courses must be online. Do not include blended or hybrid programs.</i>) | Was this charter school converted from a traditional district school? | If this school is a conversion, was the school converted to charter as part of a school turnaround effort? |
|-------------|--|---|---|---|--|
| | Y N | | Y N | Y N | Y N |
| | Y N | | Y N | Y N | Y N |
| | Y N | | Y N | Y N | Y N |
| | Y N | | Y N | Y N | Y N |
| | Y N | | Y N | Y N | Y N |
| | Y N | | Y N | Y N | Y N |
| | Y N | | Y N | Y N | Y N |

* **Alternative schools are defined as:** schools serving a student population in which 80 percent or more of the students belong to at least one of the following categories: former dropouts; students at high risk of dropping out; expelled students or those at high risk of expulsion; adjudicated youth, homeless youth; youth in, or transitioning from, foster care; pregnant or parenting teens. Alternative schools are not simply defined by serving high percentages of low-income students or English language learners.

Step 1, Part 4: *New Schools*

L Please provide the information requested for new schools you have chartered in the last year. This includes schools that transferred to you. To add a new school, please return to Step 1, Part 1, and "add a school."

| School name | Did this school transfer to you from another authorizing agency? |
|-----------------|--|
| <p>M</p> | <p style="text-align: center;"><input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>If yes, please list the date of transfer and the name of the previous authorizer.</p> <p>First School Year of your oversight: _____</p> <p>Previous authorizer name: _____</p> |
| | <p style="text-align: center;"><input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>If yes, please list the date of transfer and the name of the previous authorizer.</p> <p>First School Year of your oversight: _____</p> <p>Previous authorizer name: _____</p> |
| | <p style="text-align: center;"><input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>If yes, please list the date of transfer and the name of the previous authorizer.</p> <p>First School Year of your oversight: _____</p> <p>Previous authorizer name: _____</p> |
| | <p style="text-align: center;"><input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>If yes, please list the date of transfer and the name of the previous authorizer.</p> <p>First School Year of your oversight: _____</p> <p>Previous authorizer name: _____</p> |

Step 2: Schools Not Under Your Oversight, Including School Closures

Please provide the following additional information for any school that is no longer under your oversight. If a school listed in Step 1 was never authorized by you, please indicate that below and choose Option 5 in the Reason column.

| School name | Reason | Closure Information | | | |
|-------------|---|--|---|---|--|
| | Check one. | When was the decision made to close this school? (mm/yy) | What was the effective closing date of this school? (mm/yy) | Type of closure (Check <u>one</u> .) | Reason(s) for school closure (Please check <u>all that apply</u> .) |
| | <div style="border: 1px solid black; padding: 2px; width: 20px; text-align: center; margin-left: 10px;">N</div> <input type="checkbox"/> 1. School closed (please fill out remaining sections to the right) <input type="checkbox"/> 2. School moved under the oversight of another authorizer (please list the final school year of your oversight and the name of the new authorizer): Final School Year of your oversight: _____ Name of new authorizer: _____ <input type="checkbox"/> 3. School converted back to traditional district school status Final School Year of your oversight: _____ <input type="checkbox"/> 4. School consolidated or merged with another charter school under your authorization Date of merger: _____ School(s) merged with: _____ <input type="checkbox"/> 5. School was never authorized by your agency <input type="checkbox"/> 6. Other, please explain: _____ | | | <input type="checkbox"/> 1. Nonrenewal at end of charter term <input type="checkbox"/> 2. Revocation of charter before end of charter term as a result of regularly scheduled high-stakes review process <input type="checkbox"/> 3. Revocation of charter before end of charter term, but not as a result of a regularly scheduled high-stakes review <input type="checkbox"/> 4. Voluntary closure/surrender of charter | <input type="checkbox"/> 1. Academic <input type="checkbox"/> 2. Compliance <input type="checkbox"/> 3. Enrollment <input type="checkbox"/> 4. Facilities <input type="checkbox"/> 5. Financial <input type="checkbox"/> 6. Governance <input type="checkbox"/> 7. Other _____ |

Step 3: Cautionary or Remedial Status

Please provide the following, additional, information for any charter school that you have *placed under a cautionary or remedial status* in the past year.

| School name | Was the action taken as the result of a formal review? (Check one.) | If yes, what type of review? (Please check <u>all that apply</u> .) | Reason for cautionary/remedial action taken (Please check <u>all that apply</u> .) | Please describe the action taken. |
|-------------|--|--|---|-----------------------------------|
| | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> 1. Review to inform renewal process <input type="checkbox"/> 2. High-stakes review outside of renewal process <input type="checkbox"/> 3. Other, please specify: _____ _____ _____ | <input type="checkbox"/> 1. Academic <input type="checkbox"/> 2. Compliance <input type="checkbox"/> 3. Enrollment <input type="checkbox"/> 4. Facilities <input type="checkbox"/> 5. Financial <input type="checkbox"/> 6. Governance <input type="checkbox"/> 7. Other _____ | |
| | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> 1. Review to inform renewal process <input type="checkbox"/> 2. High-stakes review outside of renewal process <input type="checkbox"/> 3. Other, please specify: _____ _____ _____ | <input type="checkbox"/> 1. Academic <input type="checkbox"/> 2. Compliance <input type="checkbox"/> 3. Enrollment <input type="checkbox"/> 4. Facilities <input type="checkbox"/> 5. Financial <input type="checkbox"/> 6. Governance <input type="checkbox"/> 7. Other _____ | |
| | <input type="checkbox"/> Y <input type="checkbox"/> N | <input type="checkbox"/> 1. Review to inform renewal process <input type="checkbox"/> 2. High-stakes review outside of renewal process <input type="checkbox"/> 3. Other, please specify: _____ _____ _____ | <input type="checkbox"/> 1. Academic <input type="checkbox"/> 2. Compliance <input type="checkbox"/> 3. Enrollment <input type="checkbox"/> 4. Facilities <input type="checkbox"/> 5. Financial <input type="checkbox"/> 6. Governance <input type="checkbox"/> 7. Other _____ | |

Step 4: Authorizer Standards and Practices/Renewal Process

P

1. Do you conduct high-stakes charter school reviews at any time other than during the renewal process?

(e.g., if charter terms are for fifteen years, are high-stakes reviews conducted every five years, with the possibility of closure as a result of the review?)

YES → If yes, a. When do you conduct these reviews (e.g., every five years)? _____

b. Is this time period legislated by your state charter law? Yes No

NO

Q

2. In which quarter do you make most of your charter renewal decisions?

January–March April–June July–September October–December

R

3. Do you allow automatic renewals? Yes No

If yes, under what conditions? _____

O

4. Are all the charter schools that you authorize chartered/certified for the same length of time?

YES → If yes, a. What is the length of charters? _____ years

b. Is this time period legislated by your state charter law? Yes No

NO → If no, describe how charter length is set for charter schools that you authorize: _____

5. Do you use a standard renewal protocol across all schools? Yes No

6. How many charter applications did you receive between 7/1/11 and 6/30/12? _____

7. How many charter applications did you approve between 7/1/11 and 6/30/12? _____

8. Do you allow or require an incubation or planning period for new charter schools?

YES, we require an incubation period

YES, we allow an incubation period

NO

9. Do any of your schools have multiple authorizers? Yes No

If yes, please list schools and authorizers: _____

Step 5: Is there any additional information you would like to share?

Step 6: Contact Information

Please provide your contact information:

Name _____

Title _____

Phone Number _____

E-mail Address _____

Backup E-mail Address (of a colleague in the charter office) _____

Thank you for your time!

If you have any questions, please contact the National Charter School Resource Center at: authorizerupdate@air.org or 919-636-9193.