



AFFILIATED CHARTER SCHOOL 2020-2021 RENEWAL PETITION APPLICATION INTAKE CHECKLIST

Name of Affiliated Charter School: _____ Appointment Date: _____

*A successful intake includes all of the following components:

Y	N	RENEWAL PETITION APPLICATION COMPONENTS	Comments
SCOPE OF RENEWAL PETITION APPLICATION			
		Does the affiliated charter school renewal petition application include provisions that require a separate request for material revision? If yes, then reschedule intake so that the petition and the material revision can be separated and processed as two distinct proposed Board actions, per the provisions of the <i>LAUSD Policy and Procedures for Charter Schools (August 11, 2020)</i> .	
RENEWAL PETITION			
		1. Petition must use the <u>current year</u> renewal petition template (including the Federal, State, and District Required Language), must be in MS Word format, and must include: <ol style="list-style-type: none"> a. Title Page (Email will serve as date stamp upon acceptance of petition application for review) b. Table of Contents (Page numbers must be accurate) c. Description of all 15 elements 	
SUPPORTING DOCUMENTATION			
		2. Certification of Completeness with original signatures (remote intakes will allow electronic signatures)	
		3. Resolution by the local school governance council (signed by council secretary) that documents: <ol style="list-style-type: none"> a. Charter School's decision to submit an affiliated charter school renewal petition application b. Person(s) designated by the council to serve as Lead Petitioner(s) 	
		4. Copy of the school's Electronic Capacity Assessment Review (ECAR)	
		5. Waiver(s) (School must submit documentation of any type of current 2020-2021 waiver, signed by appropriate parties)	
		6. Lottery form will be made available each year through the On-Time LAUSD Unified Enrollment process (Choices Brochure & Application) . This does not need to be provided as part of intake.	
CSD INTERNAL PURPOSES ONLY			
Intake conducted by:			
Outcome:	<input type="checkbox"/> Incomplete petition application - not accepted for review	<input type="checkbox"/> Complete petition application – accepted for review	Date of Submission:

CSD Staff: To be used for recording information and documentation submitted regarding waivers (*as applicable*):

Type and Description of Waiver	Expiration Date (if any)	Type of Documentation Submitted

CSD Staff: To be used for recording information and documentation submitted regarding magnet, SAS, and similar programs (*as applicable*) to facilitate review of charter petition:

Type and Description of Program	Comments