

## CHARTER SCHOOL TEACHER APPROVAL SIGNATURE PAGE

\_\_\_\_\_  
(Name of Proposed Charter School)

The proposed charter school, seeking to open in the 2023-2024 school year, will be a (check the box that best describes the status of the proposed charter school):

- Start-up Charter School: Total number of teachers to be employed at the school during the first year of operation\_\_\_\_\_. (Signatures of 50% required)
- Conversion Charter School: Total number of permanent status teachers currently employed at the school\_\_\_\_\_. (Signatures of 50% required)

**WE, THE UNDERSIGNED CREDENTIALLED TEACHERS, have read and agree to the contents of the attached charter school proposal dated\_\_\_\_\_. Our signatures indicate that we are meaningfully interested in being employed as teachers at this charter school during the first year of operation.**

	Date of Signature	Teacher's Name (Please Print)	Street Address	Phone # including area code	Type of Credential(s) Held	CA Credential Number(s)	Credential Expiration Date(s)	College Degree(s) Held
		Teacher's Signature	City, Zip Code					