Spring 2018 Charter School Application: Proposal Overview



Proposal Overview Form

The Proposal Overview Form is part of the Part 1 Eligibility Determination & Threshold for Evaluation and should be submitted via the <u>Fluid Review portal</u>. Submitted documentation should include only the information requested below, saved in a single PDF file.

	No	n-Profit Information				
	Nonprofit Applicant red with Louisiana Secretary of State)	KIPP New Orleans, Inc.				
Applicatio		Type 1			Type 3	
Applicatio	on Type	X				
Instructio	n Location. Mark whether instruction	Site Based		Virtual		
	be primarily site based (in person, in a ding) or virtual (computer based).	x				
If a Type 1	1 Applicant, please select your	New	Transformation – Full Takeover		Transformation -	
proposal		Start			Reconfiguration	
			New		Experienced	
Operator	Track		Opera		<u>Operator</u>	
		The second second			x	
		ry Contact Information	1		X III -	
Name	Jonathan Bertsch					
Address			1924-ad			
Phone						
Email	jbertsch@kippneworleans.org					
2.2		ol Leader Information		_		
Proposed	school leader name (if identified)	not yet identified				
Proposed	school leader current job/position	not yet Identified				
List any principal/leadership programs the proposed leader is currently enrolled in or have completed (e.g., NLNS, BES, etc.)		KIPP school leaders participate in a rigorous yearlong school design fellowship				
2.516	Si	chool Information				
Proposed	School Name	To be determined				
Opening Year		2019				
Grades sei	rved Year 1	PK-8				
Grades sei	rved at capacity	PK-8				

Spring 2018 Charter School Application: Enrollment Projection



Enrollment Projection Form

Provide the following information for each school included in this proposal. Specify the planned year of opening for each (duplicating the table as needed).

School Name:	To be determined
Pursuant to OPSB Policy HA, Section 5, will your school have any proposed Focus Programs or Mission-Specific Admissions Preferences?	No

	Number of Students						
Grade Level	Year 1:	Year 2:	Year 3:	Year 4;	Year 5:	Year at Capacity:	
Pre-K	40	40	40	40	40	40	
K	104	104	104	104	104	104	
1	104	104	104	104	104	104	
2. setter 2.	104	104	104	104	104	104	
3	104	104	104	104	104	104	
4 at 25 at	104	104	104	104	104	104	
5 S	104	104	104	104	104	104	
andre 6 viertige	104	104	104	104	104	104	
	104	104	104	104	104	104	
8 m - 8 m	104	104	104	104	104	104	
9 Posta						_	
10							
1.77% 11 -5% (***							
12							
MINIMUM ENROLLMENT	796	796	796	796	796	796	
BUDGETED ENROLLMENT	976	976	976	976	976	976	
MAXIMUM	1012	1012	1012	1012	1012	1012	

Orleans Parish School Board

Spring 2018 Charter School Application: Enrollment Projection



Enrollment Plans

What adjustments to the budget, staffing and/or academic model would be made to accommodate your proposed minimum enrollment?

The budgeted and maximum enrollment figures are based on four academic sections per grade level with 26-27 students per section. The proposed minimum enrollment reflects a model of three sections per grade level with 28 students per section. If enrollment approaches the minimum threshold, the school will shift from a four sections per grade level model to a three sections per grade level model. The shift from four to three sections allows the staffing model to achieve greater efficiency by sharing content-specific teacher across certain grade levels.

Spring 2018 Charter School Application: School Management Form



School Management Form

Do any	of the following describe your organization or any of the school(s) proposed in this application?
	Will contract or partner with an education service provider (ESP) or other organization to provide school management services.
_	If so, identify the provider:
	Will have a corporate partner as defined in LA R.S. <u>17.3991.1</u> .
_	If so, identify the partner:
	Will reflect the conversion of an existing public school (Type 3 application).
	If so, identify the school:
	The applicant has previously participated in the OPSB charter RFA process.
	If so, is the application currently on appeal to the State?
\mathbf{X}	Already operates schools in Louisiana or elsewhere in the US (indicate which state(s) below)

Certification

I certify that I have the authority to submit this application and that all information contained herein is complete and accurate. I recognize that any misrepresentation could result in disqualification from the application process or revocation afterward. The person named as the contact person for the application is so authorized to serve as the primary contact for this application on behalf of the organization.

Signature of Application Primary Contact

1/2-018

Jonathan Bertsch, Director of Advocacy

Print Name & Title of Application Primary Contact

Spring 2018 Charter School Application: Assurances Form



Assurances Form

Please review the statements below and indicate whether each is true, and will hold true if the application is approved. If the answer to any item above is "No", please submit a statement of explanation.

		Yes	No
1.	The school and/or governing organization is currently registered as a nonprofit and is listed as in good standing with the Louisiana Secretary of State	X	
2.	The school is not affiliated with any religious organization and does not support nor engage in any religious activities	X	
3.	The school and/or governing organization does not have any liens, litigation history and/or sanctions from any local, state and/or federal regulatory agency against the nonprofit corporation	X	
4.	The school and/or governing organization does not have the same or substantially the same board of directors and/or officers as an existing private school	X	
5.	The school does not draw a substantial portion of the employees from an existing private school	X	
6.	The school does not receive a substantial portion of assets or property from an existing private school	X	
7.	The school is not located at the same site as an existing private school	Х	
8.	The school will participate in the city-wide common enrollment (OneApp) process	Х	
9.	The school will participate in the city-wide common expulsion process	X	
10.	The school will provide free transportation to students as stipulated in OPSB Policy HA	Х	

Certification

I certify that I have the authority to submit this application and that all information contained herein is complete and accurate, realizing that any misrepresentation could result in disqualification from the application process or revocations after award.

Larry Washington

Name of Board Chair, Charter Governing Board



01/31/18

Signature of Board Chair

Date

Spring 2018 Charter School Application: Teacher Eligibility Form



Teacher Eligibility Form

Louisiana state law requires that all groups submitting charter applications involve a minimum of three Louisiana teachers certified by the State Board of Elementary and Secondary Education in the development of their application. Please use this form to identify the certified teachers participating in the development of this application. *Also, please be sure to include a copy of current LA Teacher Certifications for the teachers listed*.

	Name	Street Address	ZIP Code	Phone	Email
1	Gina Bell		70124	314-603-4165	
2	Katie Hurley		70124	201-788-7614	
3	Renee Johnson		70119	504-451-8778	

Spring 2018 Charter School Application: Applicant Team Roster

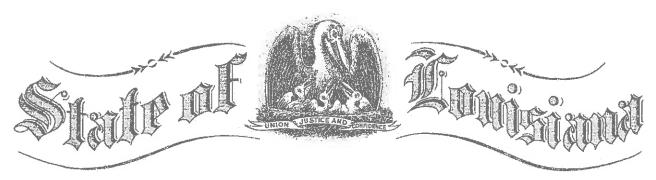


Applicant Team Roster

The Applicant Team Roster should include all identified or hired school leadership team members, governing board members and individuals that participated in the creation of the application. The evaluation team will use this roster to check for potential conflicts of interest prior to reviewing an application

There are several bases for a conflict of interest: employment, financial benefit, personal relationships, professional relationships or other interests. If applicable, any one condition may serve to disqualify a reviewer from participating in the review of an application or proposal. A conflict of interest may be real or apparent.

Name	Title	Position within Application	Email Address
Jonathan Bertsch	Director of Advocacy	application writer/reviewer	
Todd Purvis	Chief Academic Officer	application writer/reviewer	
Rhonda Aluise	Chief Executive Officer	application writer/reviewer	
Matt Lehigh	COO/CFO	application writer/reviewer	
Korbin Johnson	Managing Director of Schools	application writer/reviewer	
Joey LaRoche	Managing Director of Schools	application writer/reviewer	
Katharine Schweighardt	Managing Director of School Operations	application writer/reviewer	
James O'Donnell	Manager of Student Support Services	application writer/reviewer	
Sarah Beth Greenberg	Director of Student Support Services	application writer/reviewer	
Jenny Dennis Carey	School Leader	application writer/reviewer	
Freddy Kullman	Managing Director of Academics	application writer/reviewer	
Larry Washington	Board Chair	governing board member	



STATE DEPARTMENT OF EDUCATION

Certificate Type TEACHING CERTIFICATE NUMBER LEVEL 1 548742 VALID 06/08/2015 - 06/08/2018

Certificate Issued To:

GINA NICOLE BELL

By the Louisiana Department of Education, based upon the following:

B.A., LOYOLA UNIVERSITY, 2009

M.A.T., UNIVERSITY OF NEW ORLEANS, 2015

COMPLETED ALTERNATIVE TEACHER EDUCATION PROGRAM, UNIVERSITY OF NEW ORLEANS, 2015

ELIGIBILITY: The holder of this certificate is eligible for the following area(s) and/or terms:

PK-3, 06/08/2015

To receive a Level 2 certificate, individuals must successfully meet the standards of effectiveness for three years pursuant to Bulletin 130 and mandated by Act 54., 06/08/2015

Dr. Gary Jones

John White



STATE DEPARTMENT OF EDUCATION

Certificate Type TEACHING CERTIFICATE NUMBER LEVEL 2 556967 VALID 03/10/2016 - 03/10/2021

Certificate Issued To:

KATHRYN ELIZABETH HURLEY

By the Louisiana Department of Education, based upon the following:

COMPLETED ALTERNATIVE TEACHER EDUCATION PROGRAM, TULANE UNIVERSITY, 2012

B.A., TULANE UNIVERSITY, 2009

ELIGIBILITY: The holder of this certificate is eligible for the following area(s) and/or terms:

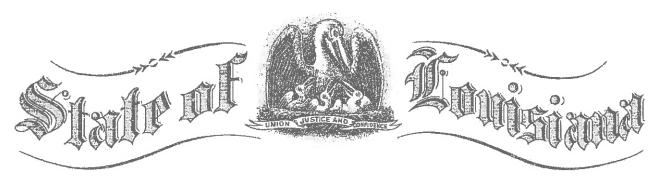
PK-3, 03/08/2012

For renewal of this certificate, individuals must successfully meet the standards of effectiveness for at least three years during the five-year initial or renewal period pursuant to Bulletin 130 and mandated by Act 54.

,03/10/2016

Dr. Gary Jones

John White



STATE DEPARTMENT OF EDUCATION

Certificate Type TEACHING CERTIFICATE NUMBER LEVEL 2 565876 VALID 11/22/2016 - 11/22/2021

Certificate Issued To:

RENEE WHITING JOHNSON

By the Louisiana Department of Education, based upon the following:

B.S., SOUTHEASTERN LOUISIANA UNIVERSITY, 2011

ELIGIBILITY: The holder of this certificate is eligible for the following area(s) and/or terms:

PK-3, 12/27/2011

For renewal of this certificate, individuals must successfully meet the standards of effectiveness for at least three years during the five-year initial or renewal period pursuant to Bulletin 130 and mandated by Act 54.

, 11/22/2016

Dr. Gary Jones

John White