



# NEW YORK STATE EDUCATION DEPARTMENT ADDENDUM TO THE PETITION TO REGISTER A NEW SCHOOL

Form A

Note: The district must complete a separate form for *each* new school it intends to open.

<b>School District:</b>		
<b>Name of Proposed School:</b>		
<b>School Address:</b>		
<b>Facility Code:</b>		
	<b>At Opening:</b>	<b>At Full Capacity:</b>
<b>Grades to be Served:</b>		
<b>Enrollment:</b>		

<b>Contact Person:</b>	<b>Phone Number:</b>	<b>Email:</b>

1. Is the new school to be a successor/replacement to a SURR/PLA (School Under Registration Review/ Persistently Lowest Achieving) school?  
*If yes, please provide the school's information in the table below. In addition, please complete Form D for the Closing School that will be replaced.*  
 Yes     No

School Name	BEDS Code	Intervention Model	Current Accountability Status	Accountability Status for Previous Year

## SCHOOL BUILDING INFORMATION

2. Was the school building occupied by another school(s) last year?  
*If yes, please provide the school's information in the table below.*  
 Yes     No

School Name	BEDS Code	Current Accountability Status	Accountability Status for Previous Year

3. Will the school share the building with another school(s) in the upcoming school year? *If yes, please provide the school's information in the table below.*

Yes  No

School Name	BEDS Code	Current Accountability Status	Accountability Status for Previous Year	Indicate Shared Resources

4. Is the new school a result of an increase in student population or a split of a single school into separate grade configurations? *If yes, please indicate the school(s) from which students will be moved.*

Yes  No

School Name	BEDS Code	Current Accountability Status	Accountability Status for Previous Year

### SCHOOL LEADER AND STAFF

5. Please provide the name of the proposed principal, as well as his/her most recent school employment history. Also, **attach a resume** to indicate the school leader's employment history/schooling.

Principal Name	Last Two Schools of Employment	BEDS Code	Accountability Status at Separation

6. Please indicate the total **number of teachers**, by grade level, as well as first-year teachers, for the upcoming school year.

Grade	Number of Teachers
K	
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
Total	
SWD	
ELL	
First-Year Teachers	

7. Please identify the district schools from which the teaching staff will transfer. Please provide the requested information for the former schools of transferred teaching staff. Additionally, identify the number of first-year teachers and any non-certified teachers, as well as teachers who will transfer from schools outside the district.

School Name	BEDS Code	Number of Teachers	Current Accountability	Accountability Status for Previous
<b>First-Year Teachers</b>				
<b>Non-Certified Teachers</b>				
<b>Outside of District</b>				

8. Please describe the staffing plan. Please provide the total number of staff in each position, and include the number reassigned to the new school and the number of new teachers.

Position	Total #	# Re-Assigned From a Closure/ Phase-Out School(s)	# Re-Assigned From Another School(s)	# New
Principal				
Assistant Principal(s)				
Supervisor of Special Ed.				
Classroom Teachers				
Other Pedagogical Personnel				
Non-Pedagogical Personnel				

### STUDENT ENROLLMENT

9. Please explain how students will be assigned to the new school.  
 Will the school require any special admissions criteria or implement any admissions procedures? For example, will an application be required prior to enrollment? Are there any particular admissions preferences? Are any groups of students excluded from admissions? Please provide an explanation on a separate sheet of the definition for this school's enrollment process.

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10. Please identify the district schools from which the students will transfer.  
 Please provide each school's information and indicate the number of students who will transfer from schools outside of the district.

School Name	BEDS Code	Number of Students	Current Accountability Status	Accountability Status for Previous Year
<b>Outside of District</b>				

11. Please enter enrollment projections for the upcoming school year, and for the school at full capacity in the table below.

	K	1	2	3	4	5	6	7	8	9	10	11	12	Ungraded	Total
<b>Upcoming School Year</b>															
<b>Average Class Size</b>															
<b>At Full Capacity</b>															
<b>New Average Class Size</b>															

12. Will the school serve **English language learners (ELL)**, **students with disabilities (SWD)**, students who are **economically disadvantaged (ED)** or **other** at-risk populations?

Yes  No

**If yes**, please indicate the intended enrollment in the tables below. In addition, please provide an explanation on a separate sheet about how these groups will be served over time (until the school reaches its full capacity).

	Number	Percentage
SWD		
ELL		
ED		
Other : _____		

How will the school's ELL student population compare to the overall district population? Will the school serve a higher, lower, or comparable percentage of ELL students than other schools in the district?	<b>Higher</b> <input type="checkbox"/>	<b>Lower</b> <input type="checkbox"/>	<b>Comparable</b> <input type="checkbox"/>
How will the school's SWD student population compare to the overall district population? Will the school serve a higher, lower, or comparable percentage of SWD students than other schools in the district?	<b>Higher</b> <input type="checkbox"/>	<b>Lower</b> <input type="checkbox"/>	<b>Comparable</b> <input type="checkbox"/>
How will the school's ED student population compare to the overall district population? Will the school serve a higher, lower, or comparable percentage of ED students than other schools in the district?	<b>Higher</b> <input type="checkbox"/>	<b>Lower</b> <input type="checkbox"/>	<b>Comparable</b> <input type="checkbox"/>

**If no**, please provide an explanation on a separate sheet about how these groups will be served by the district of location.

## CURRICULUM

13. Please identify the source(s) of the curriculum to be implemented in the new school.

*If the curriculum will be modeled on one that is currently being implemented in another school, please provide the school's information, as well as the component(s) that will be shared.*

Subject	Curriculum	Components	Grades	School Name	BEDS Code	Current Accountability Status
<i>Example: ELA</i>	<i>Core Knowledge</i>	<i>Writing: Text types, responding to reading</i>	<i>K-8</i>	<i>North School</i>	<i>000000000000</i>	<i>In Good Standing</i>
<b>ELA</b>						
<b>Math</b>						
<b>Science</b>						
<b>Social Studies</b>						