OHIO CHARTER SCHOOLS PROGRAM (CSP) GRANT IMPLEMENTATION SUBGRANT APPLICATION

COVER PAGE				
CONTACT INFORMATION				
Community School				
Name:				
Address:				
City/State/Zip Code:	-44			
Community School Primary Contact				
Name:	Title:			
Phone:	Email:			
Person Completing the Application (if different from above)				
Name: Phone:	Title: Email:			
COMMUNITY COLLOOL INFORMA	ATION			
COMMUNITY SCHOOL INFORMA	ATION			
School Type:	ATION			
	□ Conversion	□ Replicator		
School Type:		□ Replicator		
School Type: □ Newly established		□ Replicator □ Blended		
School Type: Newly established School Model:				
School Type: Newly established School Model: Site-based		□ Blended		
School Type: Newly established School Model: Site-based Opening School Year:	☐ Conversion ☐ Opening during 2022-2023	☐ Blended ☐ Opening during 2023-2024		
School Type: Newly established School Model: Site-based Opening School Year: Opened during 2021-2022	☐ Conversion ☐ Opening during 2022-2023	☐ Blended ☐ Opening during 2023-2024		
School Type: Newly established School Model: Site-based Opening School Year: Opened during 2021-2022 Do you have a signed Prelimina	☐ Conversion ☐ Opening during 2022-2023 ary Agreement dated no later that ☐ Yes	☐ Blended ☐ Opening during 2023-2024		

Enrollment Throughout Grant Timeline:				
2021-2022				
☐ Implementation Ph	ase I			
Grade Levels Served:	Enrollment:			
2022-2023				
☐ Implementation Ph	ase I			
Grade Levels Served:	Proposed Enrollment:			
2023-2024				
☐ Implementation Ph	ase I			
Grade Levels Served:	Proposed Enrollment:			
High-Performing Model				
Name and Location of School Implementing High-Performing Model the new school will Implement:				
Operator Information (if applicable)				
Is the community school managed by a CMO or EMO?				
□ No □ Yes - must provide contact information below				
Operator Name:				
Address:				
City/State/Zip Code:				
Contact Name:	Contact Title:			
Phone:	Email:			

<u>Note</u>: School applicants that are managed by a CMO or EMO <u>must</u> submit the signed operator contract with this application. Such schools must exercise special care to ensure that a direct representative, independent of the CMO or EMO, is identified to administer the subgrant [34 CFR 75.700-75.702 and 76.701]. The Department will require an assurance that the involvement of any Educational Service Provider (ESP), whether for-profit or nonprofit, remains at "arms-length" and has no involvement with the administration of the subgrant.

Sponsor Information		
Organization Name:		
Address:		
City/State/Zip Code:		
Contact Name:	Contact Title:	
Phone:	Email:	