



## Application for Schools of Excellence

### Part I - Demographic Information

Application Date: \_\_\_\_\_

#### School Data

School Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Main Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ School Website: \_\_\_\_\_

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#### Administrator/Director/Contact Data

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

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Primary Application Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

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Alternate Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

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Special Education Director: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

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