

Indiana Department of Education

SY 201 -1 Family Friendly Schools Program Application

Part One %

(Check all that apply) Public Charter Public Magnet Public Traditional () Nonpublic !

Official School Name _____ District Name _____ !

School Mailing Address _____ !
(If address is P.O. Box, also include street address)

City _____ State _____ Zip Code+4 (9 digits total) _____

County _____ School Corp Number _____ School Number _____

Telephone () _____ E-mail _____

Web site/URL _____

I have reviewed the information in this application and certify that it is accurate.

_____ Date _____
(Principal's Name and Signature) !

I have reviewed the information in this application and certify that it is accurate.

_____ Date _____ !
(Superintendent's Name and Signature)

I have reviewed the information in this application and certify that it is accurate.

_____ Date _____
(School Board President's/Chairperson's Name and Signature)

Part Two %

In 800 words or less, provide a narrative snapshot of your school. Please include the following: (1) vision and mission of school; (2) a description of your traditions, milestones, and the nature of your community and student body; and (3) summarize the school's strengths and accomplishments in the area of family and community engagement.