

Exhibit B

Proposal Overview

The applicant group's **designated representative** will serve as the contact for all communications, interviews, and notices from ICSB regarding the submitted application.

IMPORTANT NOTE: *The full application, including this form, will be posted on the ICSB website. Applicants are advised that local community members, including members of the media, may contact the designated representative for questions about the proposed school(s).*

Type of Submission:

- Existing charter has not been revoked and organizer has not been informed that its charter will not be renewed.
- Existing charter has been revoked or Organizer has been informed that its charter will not be renewed

Name of Charter School(s):

School Address(es):

Name of Board Chair(s):

Contact Information:

Name of Head of School/Principal(s):

Contact Information:

Email address(es):

Year School(s) Opened:

Name of Current Authorizer:

Name of Education Service Provider (ESP) (if applicable):

Current Grade Levels Served:

Current Student Enrollment:

Projected Student Enrollment

*Academic Year refers to the first year the school would operate if approved by ICSB.

Academic Year*	Grade Levels	Student Enrollment	
		Planned	Maximum
Year 1			
Year 2			
Year 3			
Year 4			
Year 5			

Signature of Applicant’s Designated Representative

Signature

Date