



Charter Amendment Request Form

The Charter Amendment Request Form and all required documentation must be received via email (ade.charterschools@ade.arkansas.gov) at the Arkansas Department of Education at least 35 days prior to the Charter Authorizing Panel meeting.

Charter Name: _____ **LEA:** _____

Superintendent or Director: _____

Email: _____ **Phone:** _____

Type of Amendment(s) Requested

Add a New Campus (Must also submit the Facilities Utilization Agreement)

Address: _____

School District: _____

Relocate Existing Campus (Must also submit the Facilities Utilization Agreement)

Campus Name: _____

Current Address: _____

Proposed Address: _____

School District: _____

Increase Enrollment Cap

Current Cap: _____

Proposed Cap: _____

Change Grade Levels Served

Current Grade Levels Served: _____

Proposed Grade Levels Served: _____

Waiver(s)

Statute/Standard/Rule to be Waived: _____

Rationale for Waiver:

Statute/Standard/Rule to be Waived: _____

Rationale for Waiver: