

Charter Amendment Request From

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

Cha	ter Name: LEA:				
Sup	Superintendent or Director:				
Ema	il: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:				

Waive	er(s)		
	Statute/Standard/Rule to be Waived:		
	Rationale for Waiver:		
	Statute/Standard/Rule to be Waived:		
	Rationale for Waiver:		