

January 12, 2012

POLARIS Public School

Dear Superintendent and Board President:

This letter is to inform you that K16Ready Education Initiative, Inc. intends to submit an application to the State Board of Education (SBOE) from an open enrollment charter school. The SBOE's guidelines require that applicants send the enclosed *Statement of Impact* form and a copy of the completed *Application Coversheet* to each district and open-enrollment charter school that may be affected by the proposed charter school. Your district or charter school is receiving this information because the proposed charter school's designated geographic boundary overlaps with your district's or charter school's boundary. The list includes:

- Districts – Attached
- Charters – Attached

The attached *Statement of Impact* form provides a district or charter school with an opportunity to inform SBOE of whether the proposed charter school may adversely impact it financially or in some other respect. The form also allows a district to notify the SBOE of whether the proposed school may negatively affect its student enrollment in a manner that would impair its ability to comply with a court order. Completed forms may be returned to:

Texas Education Agency
Division of Charter School Administration
1701 North Congress Avenue
Austin, TX 78701

Forms must be received by no later than August 3, 2012 for the information to be considered by the SBOE. If you have questions about the process for approval of open-enrollment charter schools, please contact the Division of Charter School Administration at (512) 463-9575 or visit <http://www.tea.state.tx.us/charter>. If you would like a complete application for the open-enrollment charter school, please contact K16Ready Education Initiative, Inc. at 817-891-2299.

Sincerely,

Dr. Marc Chernhizer

CEO of Sponsoring Entity

Enclosures: *Statement of Impact Form*
Application Cover Sheet

Application Coversheet

K16Ready Education Initiative, Inc.

POLARIS Public School

Name of Sponsoring Entity

Proposed Seventeenth Generation Charter School Name

Note: If the sponsoring entity is a 501(c)(3) nonprofit organization, the name must appear exactly as it appears in the Articles of Incorporation or any amendments thereto.

The sponsoring entity is a (Check only one.):

501(c)(3) nonprofit organization

Governmental Entity

College or University

Chairperson of Governing Body of Sponsoring Entity: Dr. Marc Chernhizer

CEO of Sponsoring Entity: Dr. Marc Chernhizer

CEO/Superintendent of Proposed Charter School: Nora Elizondo Berry

Board Member Who Attended an Applicant Conference: Dr. Marc Chernhizer

Date of Conference: 12/08/11

Applicant Mailing Address (This address will be used for contact regarding this application.):

975 Easton Place, Dallas, Texas 75218

Physical Address of Proposed Administrative Offices (if different from above):

Number of Campuses Being Requested: 2

Physical Address of Each Proposed Campus (Please include street address, city, state, zip, and county). If the specific address is unknown at this time, please provide the county and general location of the proposed campus:

One Campus: Grand Prairie ISD (East Grand Prairie) Two Campus: Arlington ISD (Central Arlington)

Contact Name: Nora Berry

Contact E-mail Address: nora.berry@gmail.com

Contact Phone #: 817-891-2299

Contact Fax #: na

State maximum enrollment and check all grade levels to be served for each school year.

By Year 3, at least one grade in which the state assessments are administered must be offered.

Year 1: Maximum Enrollment: 1608

Pre-K3 Pre-K4 K 1 2 3 4 5 6 7 8 9 10 11 12

Year 2: Maximum Enrollment: 1808

Pre-K3 Pre-K4 K 1 2 3 4 5 6 7 8 9 10 11 12

Year 3: Maximum Enrollment: 2008

Pre-K3 Pre-K4 K 1 2 3 4 5 6 7 8 9 10 11 12

Year 4: Maximum Enrollment: 2208

Pre-K3 Pre-K4 K 1 2 3 4 5 6 7 8 9 10 11 12

Year 5: Maximum Enrollment: 2408

Pre-K3 Pre-K4 K 1 2 3 4 5 6 7 8 9 10 11 12

I certify that I have the authority to submit this application and that all information contained herein is complete and accurate, realizing that any misrepresentation could result in disqualification from the application process or revocation after award. In accordance with TEC §12.120, I further certify that no members of the governing body of the sponsoring entity or of the proposed charter school or any officers or employees of the proposed school have been convicted of a misdemeanor involving moral turpitude or of any felony. I understand that incomplete applications will not be considered.

Dr. Marc Chernhizer PhD
(BLUE INK) Signature of Chief Executive Officer of Sponsoring Entity

Date

Dr. Marc Chernhizer

Printed Name

Nora Elizondo Berry
(BLUE INK) Signature of Application Preparer

Date

Nora Elizondo Berry

Printed Name

With what company is the application preparer associated? Nora Elizondo Berry

Was preparer paid? Yes No

SAS 536-12
RFA 701-11-108

**Statement of Impact
Seventeenth Generation Charter Application**

Purpose of this form: The sponsoring entity identified on the cover letter is submitting an application to the State Board of Education (SBOE) for approval to operate an open-enrollment charter school. The name and location, if known, of the proposed charter school are provided below. This form must be sent to all districts and open-enrollment charter schools likely to be affected by the proposed open-enrollment charter school. Specifically, the SBOE has directed applicants to send this form to each district and open-enrollment charter school whose boundary overlaps with the designated geographic boundary or transfer boundary of the proposed charter school. A district or open-enrollment charter school may submit this form to provide the SBOE with information relating to any financial difficulty that a loss in enrollment may have on the district or open-enrollment charter school, and any other information that a district or open-enrollment charter school wishes to share with the SBOE. For more information about the proposed charter, please contact the sponsoring entity.

Instructions: Please submit the completed form to TEA at the address provided on the cover letter by no later than August 3, 2012.

Note: See Texas Education Code §12.106 for information about state funding.

Name of Proposed Charter School: POLARIS Public School
Physical Address or General Location of Proposed Charter School: Grand Prairie ISD (East Grand Prairie and Arlington ISD (Central Arlington))

Check the appropriate response below:

- The proposed open-enrollment charter school **is not** expected to adversely impact the district or open-enrollment charter school to a significant degree.
- The proposed open-enrollment charter school **is** expected to have a major impact on the district or open-enrollment charter school in the following manner:

(Describe the impact in the space below and/or attach any supporting documentation.)

This could impact our school district because loss of students means loss of monies.

Aubrey ASD County-District Identification Number 061-907
District/Charter School Name
415 Tischell Lane Aubrey, TX 76227
District/Charter School Address

Signature of Superintendent
James A. Moraco
Print Superintendent's Name
2/22/12
Date

Signature of Board President
Mike Sessions
Print Board President's Name
(940) 668-0060
Phone Number

January 19, 2012

Athlos Academy

Dear Superintendent and Board President:

This letter is to inform you that Athlos of Texas, Inc. intends to submit an application to the State Board of Education (SBOE) from an open enrollment charter school. The SBOE's guidelines require that applicants send the enclosed *Statement of Impact* form and a copy of the completed *Application Coversheet* to each district and open-enrollment charter school that may be affected by the proposed charter school. Your district or charter school is receiving this information because the proposed charter school's designated geographic boundary overlaps with your district's or charter school's boundary. The list includes:

- Districts – Attached
- Charters – Attached

The attached *Statement of Impact* form provides a district or charter school with an opportunity to inform SBOE of whether the proposed charter school may adversely impact it financially or in some other respect. The form also allows a district to notify the SBOE of whether the proposed school may negatively affect its student enrollment in a manner that would impair its ability to comply with a court order. Completed forms may be returned to:

Texas Education Agency
Division of Charter School Administration
1701 North Congress Avenue
Austin, TX 78701

Forms must be received by no later than August 3, 2012 for the information to be considered by the SBOE. If you have questions about the process for approval of open-enrollment charter schools, please contact the Division of Charter School Administration at (512) 463-9575 or visit <http://www.tea.state.tx.us/charter>. If you would like a complete application for the open-enrollment charter school, please contact Athlos of Texas, Inc. at 2144917471.

Sincerely,
Matt Cotter
CEO of Sponsoring Entity
Enclosures: *Statement of Impact Form*
Application Cover Sheet

Application Coversheet

Athlos Academy

Athlos of Texas, Inc.

Proposed Seventeenth Generation Charter School Name

Name of Sponsoring Entity

Note: If the sponsoring entity is a 501(c)(3) nonprofit organization, the name must appear exactly as it appears in the Articles of Incorporation or any amendments thereto.

The sponsoring entity is a (Check only one.):

[X] 501(c)(3) nonprofit organization [] Governmental Entity [] College or University

Chairperson of Governing Body of Sponsoring Entity: Matt Cotter

CEO of Sponsoring Entity: Matt Cotter

CEO/Superintendent of Proposed Charter School:

Board Member Who Attended an Applicant Conference: Matt Cotter Date of Conference: 12/08/11

Applicant Mailing Address (This address will be used for contact regarding this application.):

10117 Sourwood Dr. Keller, TX 76244

Physical Address of Proposed Administrative Offices (if different from above):

Number of Campuses Being Requested: one (1)

Physical Address of Each Proposed Campus (Please include street address, city, state, zip, and county.). If the specific address is unknown at this time, please provide the county and general location of the proposed campus:

Arlington ISD, Mansfield ISD, OR Grandprairie ISD

Contact Name: TBD

Contact E-mail Address:

Contact Phone #: 2144917471

Contact Fax #:

State maximum enrollment and check all grade levels to be served for each school year.

By Year 3, at least one grade in which the state assessments are administered must be offered.

Year 1: Maximum Enrollment: 650

[] Pre-K3 [] Pre-K4 [X] K [X] 1 [X] 2 [X] 3 [X] 4 [X] 5 [X] 6 [] 7 [] 8 [] 9 [] 10 [] 11 [] 12

Year 2: Maximum Enrollment: 875

[] Pre-K3 [] Pre-K4 [X] K [X] 1 [X] 2 [X] 3 [X] 4 [X] 5 [X] 6 [X] 7 [] 8 [] 9 [] 10 [] 11 [] 12

Year 3: Maximum Enrollment: 1000

[] Pre-K3 [] Pre-K4 [X] K [X] 1 [X] 2 [X] 3 [X] 4 [X] 5 [X] 6 [X] 7 [X] 8 [] 9 [] 10 [] 11 [] 12

Year 4: Maximum Enrollment: 1300

[] Pre-K3 [] Pre-K4 [X] K [X] 1 [X] 2 [X] 3 [X] 4 [X] 5 [X] 6 [X] 7 [X] 8 [X] 9 [] 10 [] 11 [] 12

Year 5: Maximum Enrollment: 1600

[] Pre-K3 [] Pre-K4 [X] K [X] 1 [X] 2 [X] 3 [X] 4 [X] 5 [X] 6 [X] 7 [X] 8 [X] 9 [X] 10 [] 11 [] 12

I certify that I have the authority to submit this application and that all information contained herein is complete and accurate, realizing that any misrepresentation could result in disqualification from the application process or revocation after award. In accordance with TEC §12.120, I further certify that no members of the governing body of the sponsoring entity or of the proposed charter school or any officers or employees of the proposed school have been convicted of a misdemeanor involving moral turpitude or of any felony. I understand that incomplete applications will not be considered.

(BLUE INK) Signature of Chief Executive Officer of Sponsoring Entity

Date

Matt Cotter

Printed Name

(BLUE INK) Signature of Application Preparer

Date

TBD

Printed Name

With what company is the application preparer associated? Athlos of Texas, Inc.

Was preparer paid? [] Yes [X] No

**Statement of Impact
Seventeenth Generation Charter Application**

Purpose of this form: The sponsoring entity identified on the cover letter is submitting an application to the State Board of Education (SBOE) for approval to operate an open-enrollment charter school. The name and location, if known, of the proposed charter school are provided below. This form must be sent to all districts and open-enrollment charter schools likely to be affected by the proposed open-enrollment charter school. Specifically, the SBOE has directed applicants to send this form to each district and open-enrollment charter school whose boundary overlaps with the designated geographic boundary or transfer boundary of the proposed charter school. A district or open-enrollment charter school may submit this form to provide the SBOE with information relating to any financial difficulty that a loss in enrollment may have on the district or open-enrollment charter school, and any other information that a district or open-enrollment charter school wishes to share with the SBOE. For more information about the proposed charter, please contact the sponsoring entity.

Instructions: Please submit the completed form to TEA at the address provided on the cover letter by no later than August 3, 2012.

Note: See Texas Education Code §12.106 for information about state funding.

Name of Proposed Charter School: Athlos Academy
Physical Address or General Location of Proposed Charter School: _____
Arlington ISD, Mansfield ISD, OR Grandprairie ISD

Check the appropriate response below:

- The proposed open-enrollment charter school is **not** expected to adversely impact the district or open-enrollment charter school to a significant degree.
- The proposed open-enrollment charter school **is** expected to have a major impact on the district or open-enrollment charter school in the following manner:

(Describe the impact in the space below and/or attach any supporting documentation.)

This could impact our school district because loss of students means loss of monies.

Aubrey ISD County-District Identification Number 061-907
District/Charter School Name
415 Jiddell Lane Aubrey, TX 76227
District/Charter School Address

Signature of Superintendent
James A. Moraco
Print Superintendent's Name
2/22/12
Date

Signature of Board President
Mike Sessions
Print Board President's Name
(940) 686-0060
Phone Number



ARLINGTON CLASSICS ACADEMY

January 17, 2012

Aubrey ISD
415 Tisdell Ln.
Aubrey, TX 76227-9619

Dear Superintendent and President of the Board of Trustees:

This is to inform you that the following charter school intends to submit an amendment request to the commissioner of education:

Arlington Classics Academy
County-District #220-802
5206 S. Bowen Road
Arlington, TX 76017

As part of the amendment process, charter schools are required to notify any districts that are likely to be affected by the change. The enclosed Statement of Impact form indicates the type of amendment request being made.

Specifically, Texas Education Agency guidelines require that the Statement of Impact form be sent to each district that may be affected. Information is requested if the proposed change may adversely impact a district financially or if the proposed change may impact the student enrollment of a district in a manner that impairs the district's ability to comply with a court order. The enclosed form may be completed by any district that may be affected, signed by the district's board president and superintendent, and returned to the Texas Education Agency, Charter Schools Division, 1701 North Congress Avenue, Austin, Texas 78701-1494.

Please review the enclosed form and notify the Texas Education Agency if your district will be impacted by the request.

Sincerely,

Teresa P. Thibodeau, President
Board of Directors
Arlington Classics Academy

**Statement of Impact
AMENDMENT**

ARLINGTON CLASSICS ACADEMY
Charter School

220-802
County-District #

The charter school above plans to submit the following amendment or amendments to its open-enrollment charter for consideration by the commissioner of education:

1. Expand grade levels served

Currently approved grade levels: _____ Requested change: _____

2. Increase maximum enrollment

Currently approved maximum enrollment: _____ Requested change: _____

3. Add a campus

Proposed new address, if available: _____

If the campus address has not yet been secured, the school districts within the currently approved geographic boundary are listed here:

4. Expand geographic boundary

The proposed new school districts/area to include are listed here:

SCHOOL DISTRICTS WITHIN THE 17 COUNTIES LISTED ON THE ATTACHED EXHIBIT "A".

District Staff: Check the appropriate response below:

The proposed change for the open-enrollment charter school is not expected to impact the school district to a significant degree.

The proposed change for the open-enrollment charter school is is expected to have a major impact on the school district in the following manner:

Loss of students means loss of monies.

Aubrey ISD

District Name

061-907

County-District #

415 Juddell Lane Aubrey, TX 76227

District Address

(940) 668-0060

Phone Number

Signature of Board President

James A. Monaco

Print Board President's Name

Signature of Superintendent

Mike Sessions

Print Superintendent's Name

1/19/12

Date Received by District