

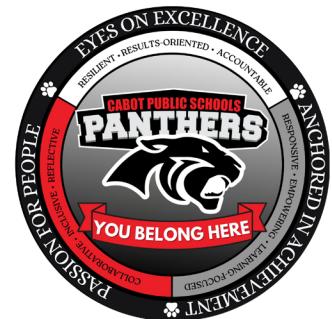


# CABOT PANTHER ACADEMY

Charter Amendment Request  
2026

# Mission

Our Mission at Cabot Panther Academy is to reimagine education by building relationships, inspiring every student to reach their full potential, teaching them academics and life skills, guide them to become successful, productive citizens, and helping them find their own strengths and unique abilities.



# Proposed Amendments

---



# Amendment Requests

1. The addition of grades Kindergarten (K) through Fourth Grade (4) to the charter's authorized grade levels.
2. The addition of an instructional campus, to be housed at Magness Creek Elementary (LEA 4304013), to house a hybrid K-6 educational option for students in the district.
3. An increase in the total student enrollment cap from 500 to 650 students.



# Rationale for Requests

---



# Rationale for Amendment Request 1

1. Fulfilling a community desire for flexible learning.
2. Ensure curricular cohesion and vertical alignment between schools.
3. Pilot Innovative Educational Models.



# Rationale for Amendment Request 2

1. Leveraging existing district assets.
2. Ensure operational efficiency.



# Rationale for Amendment Request 3

1. Increase opportunities for students in grades K-6 without hindering those in grades 7-12.



# Draft Schedules

---



# Draft Student Schedule 1

## Day 1: ELA

Social/Emotional	20 mins.
Decoding & Small Group	90 mins.
Vocabulary & Comprehension	60 mins.
Writing Process	60 mins.
Handwriting Instruction	15 mins.
Social Studies	35 mins.
Read Aloud	30 mins.
Lunch/Recess	50 mins.
Wellness	20 mins.
Activity	50 mins.
<b>Total</b>	<b>430</b>

## Day 2: STEM

Social/Emotional	20 mins.
Math Rotations & Small Group	90 mins.
Fluency	30 mins.
Number Talk/Mental Strategies	20 mins.
Problem Solving	60 mins.
Science	60 mins.
Science Lab	30 mins.
Lunch/Recess	50 mins.
Wellness	20 mins.
Activity	50 mins.
<b>Total</b>	<b>430</b>

# Draft Student Schedule 1

Social/Emotional	15 mins.
Decoding & Small Group	45 mins.
Vocabulary and Comprehension	30 mins.
Writing Process	30 mins.
Handwriting Instruction	10 mins.
Social Studies	20 mins.
Read Aloud	15 mins.
Math Block & Small Group	45 mins.
Fluency	15 mins.
Number Talk/Mental Strategies	10 mins.
Problem Solving	30 mins.
Science/STEM	45 mins.
Lunch/Recess	50 mins.
Wellness	20 mins.
Activity	50 mins.
<b>Total</b>	<b>430</b>



# Application Screenshots

---





STUDENT INFORMATION																					
NAME _____		DATE OF BIRTH _____																			
(FIRST) (MIDDLE) (LAST) (NAME TO BE CALLED)		MONTH / DAY / YEAR																			
CURRENT GRADE _____		STUDENT ID # _____	GENDER: MALE / FEMALE																		
SOCIAL SECURITY NUMBER (OR ASSIGNED NUMBER) _____																					
RACE (CIRCLE ONE OR MORE IF APPLICABLE) WHITE BLACK HISPANIC ASIAN / PACIFIC ISLANDER AMERICAN INDIAN / ALASKAN																					
MAILING ADDRESS _____		CITY _____	ZIP _____																		
911 ADDRESS (IF DIFFERENT FROM ABOVE) _____		CITY _____	ZIP _____																		
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="2" style="width: 20%;">STUDENT LIVES WITH (CIRCLE ONE)</td> <td colspan="2">BOTH PARENTS</td> <td>MOTHER ONLY</td> <td>FATHER ONLY</td> <td>FOSTER PARENT</td> </tr> <tr> <td colspan="2">LEGAL GUARDIAN</td> <td>MOTHER/STEP-FATHER</td> <td>FATHER/STEP-MOTHER</td> <td>OTHER</td> </tr> <tr> <td style="text-align: center;">LEGAL GUARDIANSHIP (CIRCLE ONE)</td> <td colspan="2">BOTH PARENTS</td> <td>MOTHER ONLY</td> <td>FATHER ONLY</td> <td>OTHER (SPECIFY): _____</td> </tr> </table>					STUDENT LIVES WITH (CIRCLE ONE)	BOTH PARENTS		MOTHER ONLY	FATHER ONLY	FOSTER PARENT	LEGAL GUARDIAN		MOTHER/STEP-FATHER	FATHER/STEP-MOTHER	OTHER	LEGAL GUARDIANSHIP (CIRCLE ONE)	BOTH PARENTS		MOTHER ONLY	FATHER ONLY	OTHER (SPECIFY): _____
STUDENT LIVES WITH (CIRCLE ONE)	BOTH PARENTS		MOTHER ONLY	FATHER ONLY		FOSTER PARENT															
	LEGAL GUARDIAN		MOTHER/STEP-FATHER	FATHER/STEP-MOTHER	OTHER																
LEGAL GUARDIANSHIP (CIRCLE ONE)	BOTH PARENTS		MOTHER ONLY	FATHER ONLY	OTHER (SPECIFY): _____																
LIST PARENT / GUARDIAN WITH WHOM STUDENT LIVES																					
PARENT/GUARDIAN NAME			RELATIONSHIP TO STUDENT																		
ADDRESS (IF DIFFERENT FROM ABOVE)			EMPLOYER/OCCUPATION																		
HOME PHONE		CELL PHONE		WORK PHONE																	
PARENT/GUARDIAN NAME			RELATIONSHIP TO STUDENT																		
ADDRESS (IF DIFFERENT FROM ABOVE)			EMPLOYER/OCCUPATION																		
HOME PHONE		CELL PHONE		WORK PHONE																	
IT IS THE LAW: ACT 663—SECTION [S] (H) ANY PERSON WHO KNOWINGLY GIVES A FALSE RESIDENTIAL ADDRESS FOR THE PURPOSES OF PUBLIC SCHOOL ENROLLMENT IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE																					
NAMES AND AGES OF OTHER CHILDREN LIVING IN HOUSEHOLD																					
<hr style="display: inline-block; width: 20%; vertical-align: middle;"/> <hr style="display: inline-block; width: 20%; vertical-align: middle;"/> <hr style="display: inline-block; width: 20%; vertical-align: middle;"/>																					

**STUDENT SIGNATURE**

DATE

**PARENT/GUARDIAN STATEMENT**

**WHY DO YOU BELIEVE YOUR CHILD WILL BE SUCCESSFUL AS A PANTHER ACADEMY STUDENT?**

**PARENT/GUARDIAN SIGNATURE**

DATE

## DIGITAL STUDENTS

IN ORDER TO BE CONSIDERED FOR PANTHER ACADEMY'S DIGITAL LEARNING OPTION, YOU MUST PROVIDE TWO TEACHER RECOMMENDATIONS INDICATING YOU ARE





#### EMERGENCY INFORMATION

PLEASE LIST TWO PEOPLE WE CAN CONTACT IF THE PARENT/GUARDIAN CANNOT BE REACHED.

NAME		RELATIONSHIP TO STUDENT
HOME PHONE	CELL PHONE	WORK PHONE
NAME		RELATIONSHIP TO STUDENT
HOME PHONE	CELL PHONE	WORK PHONE

#### ACADEMIC INFORMATION

- NAME, ADDRESS, AND PHONE NUMBER OF LAST SCHOOL ATTENDED:  
\_\_\_\_\_

- IS ENROLLEE CURRENTLY UNDER A LONG-TERM SUSPENSION/EXPULSION FROM HIS/HER PREVIOUS SCHOOL OR IS AN EXPULSION CONFERENCE PENDING?  YES  NO

- DO YOU HAVE ACCESS TO THE INTERNET?  YES  NO

INTERNET PROVIDER: \_\_\_\_\_

PARENT/GUARDIAN E-MAIL ADDRESS: \_\_\_\_\_

- DOES THE STUDENT REQUIRE SPECIAL SERVICES?  YES  NO

IF YES, CIRCLE ALL THAT APPLY.

SPEECH   ESL   RESOURCE   INCLUSION   504 PLAN   GIFTED AND TALENTED   DYSLEXIA   OT/PT

#### FOLDER HOLDER STATEMENT (only for students with an IEP):

*Please have this portion completed by the special education teacher that holds your child's IEP.*

STUDENT STRENGTHS	STUDENT CONCERNs

IF THE STUDENT HAS AN IEP OR LPAC, PLEASE HAVE THE FOLDER TEACHER SIGN HERE TO INDICATE THAT THEY SUPPORT THIS APPLICATION.

PRINT NAME: \_\_\_\_\_

# Services Provided to Students

---



# Services Provided

- All services that are provided to traditional students:
  - Special Education
  - G/T
  - ESOL
  - Counseling
  - Media Center
  - Etc.
- Hybrid Schedules will be built to allow access to needed services for students in the hybrid program.

# Additional Evaluation

---



# Metrics for Evaluation of Amendments

1. Increased enrollment in CPS K-6 enrollment after addition of Hybrid option.
2. Academic Growth of K-6 Hybrid Students.
  - a. Reading
  - b. Math
  - c. Science
3. BoY and EoY Culture surveys



# Questions?

---

