## Council of Bilingual Schools (COBIS) ANNUAL REPORT FORM for ACCREDITED MEMBER SCHOOLS

NAME OF SCHOOL:	School Year:/
Address:	Phone: ()
E-Mail:	Website:
	k all that apply): □ Boys only □ Girls only □ Typical Program □ Special Education Programs Corporation for Profit □ Religiously affiliated □ Non-Sectarian □ Non-Profit
Year school was founded: _	
Name of Principal:	Years as Head of School:
Grades offered:thr	ru to to
Address of Additional Camp	us (if applicable):
Grades offered at 2nd Camp	ous: to   □ Typical Program □ Special Education Programs
Fall Reopening: □ On Ca	mpus/In Person □ Virtually only □ Both Options □ Hybrid (staggered days)
1st day of the current Schoo	I Year: Last day of the current School Year:
Total Instructional days:	(excluding Holidays and Teacher Planning Days)
Is property where school is o	pperating owned or leased by school Operator? □ owned □ leased
Name of property owner(s) v	vhere school is located:
If property is leased, name of	of Lessee(s):
	any years are remaining in said lease?
□ COGNIA/SACS □ NCPSA □ GOLD SEAL	Month/Year of expiration:
Year school was originally a	ccredited:
Date of last CORIS/NIPSA/9	Accreditation expiration date:

ENROLLMENT:	4 year old VPK: 5 year old Kinde 1st Grade: 2nd Grade: 3rd Grade: 4th Grade:	llers: re-Kindergarten: : ergarten: 5th Grade: 6th Grade: 7th Grade:	11th Grad 12th Grad	le: le:			
		TOTAL ENROLLMENT:					
NO. OF STUDENTS EN	IROLLED IN EA	CH SUBSIDIZED PROC	GRAM: (indicate	# of students registered	in each program)		
				School Readin da Empowerment Schola			
Total funding received la	ast school year fr	om State/Federal Schol	arship Programs	3:			
Date of last "Step-Up Ag	greed Upon Proc	edures" Report complete	ed by a CPA firm	1:			
TUITION/FEES:							
Registration Fee range:	\$	_to \$					
Tuition Range: from \$_	to	\$ per:	□ year □ m	onth (check one)			
Changes from Previous	school year:	School Ownership	□ yes *	□ no			
		School Philosophy	□ yes *	□ no			
		School Programs	□ yes *	□ no			
* If yes, please attach a pa	age with detailed e	School Location explanation.	□ yes *	□ no			
Name(s) of other Member	er Organizations	S:	_				
FACULTY INFORMATION	ON:						
Total number of Teachin # without Degre # with 4-year De Total # of Staff (non-inst	ees: egree:	# with AA/CDA Degree: # with Master's Degree	: # v	 with Ph.D.:			
Minority Survey:							
	ic American American	# of Students: # of	Faculty:				

## LIST FACULTY CHANGES FROM PREVIOUS YEAR:

Name of Employee that left the school:	Name of Employee replacing him/her:	Field/Grade of Teaching	
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AGREEMENT			
State and Federal laws and codes,	S By-Laws and with the COBIS published including ADA laws and the following Department	chool) complies with the non-discrimination "Code of Ethics." We hereby comply with a artments: Health, Fire, Safety and Zoning. We say "Accreditation Standards and Evaluation"	
PLEASE ATTACH THE SCHOOL C	ALENDAR FOR THE CURRENT SCHOO	L YEAR	
Date:	Signature of Principal or Head of School		