### WYOMING DEPARTMENT OF EDUCATION

Jillian Balow, Superintendent of Public Instruction Hathaway Building, 2nd Floor, 2300 Capitol Avenue Cheyenne WY 82002-0050



### REGISTRATION APPLICATION FOR CHAPTER 18 NON-RELIGIOUS K-12 SCHOOLS

CHECKLIST:	
\$200.00 License Fee	
Registered Agent fee - \$100.00 (per agent)	
CHAPTER 18 FORMS:	
PSL Form 610 B – Non-degree granting initial application	
PSL Form 15 – Agent Application	
PSL Form 14 – Personnel information (All owners, staff, & instructors)	
PSL Form 28 – Advertising Policy	
PSL Form 18 – Licensing History Disclosure	
ADDITIONAL DOCUMENTATION:	
Alphabetical list of administrators and faculty	
<b>Proof of Certification for all staff or notification letter to parents indicating not all staff</b> is certified by the State of Wyoming	
Student/Parent Handbooks	
<b>Enrollment Contract including Tuition Fees and Refund Policy</b>	
Probationary Academic/Discipline Policy	
Special Education Policy	
Proof of Adequate Instructional Area	
Current Financial Statement	
School Calendar	
<b>Proof of Compliance with City, County and State Regulations</b>	

#### OFFICE USE ONLY:

and the second s	
Date Approved:	
Application Fee:	

#### WYOMING DEPARTMENT OF EDUCATION

Jillian Balow, Superintendent of Public Instruction Hathaway Building, 2nd Floor, 2300 Capitol Avenue Cheyenne WY 82002-0050



#### WYOMING DEPARTMENT OF EDUCATION CHAPTER 18 PRIVATE K-12 SCHOOL APPLICATION

Name of Institution:	Contact Name:	
Telephone Number:	Fax Number:	
Mailing Address	Physical Address (if different)	
Street Address:	Street Address:	
City/State/Zip:	City/State/Zip:	
Email:	Website:	
Registration for the period o	of July 1, through June 30,	
accredit the above institution? If yes, please provide a copy of the	e accreditation certificate.	
ordinances, and state laws rela	chool is in compliance with local, city, and county ating to the health and safety of all persons upon the l requirements of "Wyoming Private School Licensing	
The information contained in the knowledge and belief.	this application is true and correct to the best of my	
Chief Administrator (print or typ	pe) Date	
Signature		

#### WYOMING DEPARTMENT OF EDUCATION CHAPTER 18 APPLICATION TO LICENSE AGENTS

Name of Institution:				
Registration Period:	July 1, thr	ough June 30	),	
entitles me to solicit l Wyoming in accordanthis capacity within t	t. 21-2-403, I here ousiness for the ab ice with Wyo. Stat. he spirit and letter	by apply for a ove reference 21-2-401 thr	Registere d institution ough 407.	
Registered Agent's Na	ime (Print)		Area Code	Phone Number
Street Address				
City	State	Zip		
Registered Agent's Sig	gnature		Date	
I have carefully reviewed the qualifications and the personal data of the above applicant and believe that he/she will perform as pledged above. I request that he/she be issued a permit to solicit business for our school in the State of Wyoming.				
Name (print)		Phone Number		
Position – Chief Admi Executive Officer (pri		-		
Signature		-		
			Office Use	Only:
			Date Appro	mber: ved: Fee:

# WYOMING DEPARTMENT OF EDUCATION CHAPTER 18 PERSONNEL INFORMATION

Name of Institution:				
Position held (check more than one if ap	propriate):			
Chief Administrator Sch	Chief Administrator School Director			
Chief Administrator School Director Licensed Agent Instructor Other(please specify):				
Personal Information:				
Name:	Address:			
City/Zip/State		Phone Number:		
Formal Education:				
Name of Schools or Colleges:	Date Last Attended:	Degree Earned:		
Name of Schools or Colleges:	Date Last Attended:	Degree Earned:		
Name of Schools or Colleges:	Date Last Attended:	Degree Earned:		
Work Experience:				
Employer - Address:	Position Held:	Dates (From-To):		
Employer - Address:	Position Held:	Dates (From-To):		
Employer - Address:	Position Held:	Dates (From-To):		
HAVE HAVE NOT been dismissed from any position for immoral or unprofessional conduct or had a license or permit revoked or suspended for similar reasons.  The above information is true and correct to the best of my knowledge and belief.				
Employee Name (Print or Type)		Date		
Employee Signature				

## WYOMING DEPARTMENT OF EDUCATION CHAPTER 18 ADVERTISING POLICY

Name of Institution:	
Address:	
If the institution chooses to advertise that they are licensed by the of Education, the student must sign the following statement: "I use of Institution) is licensed by the Wyoming Department of Education W.S. 21-2-401 through 21-2-407 and that neither the Department Wyoming State Board of Education has accredited or endorsed as being offered by (Name of Institution)."	inderstand that (Name on in accordance with nt of Education nor the
Signature on this document assures that the named institutio policy, W.S. 21-2-401 through 21-2-407, and Chapter 18 Rules	•
Chief Administrator	Date
Signature	

### WYOMING DEPARTMENT OF EDUCATION CHAPTER 18 LICENSING DISCLOSURE

Name of Institution:		
Pursuant to Wyoming Statute §21-2-401 a institution must disclose whether its licens not been renewed by the licensing jurisdict taken against the institution, a detailed exincluded with this application. Additionally subsequent judicial or administrative process.	e has been revoked tion of another state planation of the red y, any and all docu	l, suspended, denied, or has e. If such action has been usons for the action must be uments relating to any
1. Have any of the institution's employees marketing and/or other operational persodenied or not renewed in this state or and	nnel) ever had thei	<del>_</del>
NO YES		
If yes, please explain:		
Action:	Date:	Jurisdiction:
2. Has the applicant/licensee had past or omission in any information submitted to any change in information in a timely man NO YES	the Department of	
If yes, please explain:		
ii yes, picase explain.		
Action:	Date:	Jurisdiction:
I have carefully reviewed W.S. §§21-2-4 and Regulations. The above information knowledge and belief.	•	<del>-</del>
Name (Printed)	Title (Pres	ident/Owner)
Signature	Date	