



# Illinois State Board of Education

100 North First Street  
Springfield, Illinois 62777-0001

## COVER SHEET FOR DISTRICT RESPONSE TO CHARTER SCHOOL APPEAL

### CHARTER SCHOOLS DEPARTMENT

DISTRICT NAME		SUPERINTENDENT NAME	
BOARD MEMBERS (include name and board position)			
PRIMARY CONTACT NAME	PRIMARY CONTACT PHONE	PRIMARY CONTACT EMAIL	
ATTORNEY CONTACT NAME	ATTORNEY CONTACT PHONE	ATTORNEY CONTACT EMAIL	
DATE OF RENEWAL APPLICATION SUBMISSION OR NOTICE OF REVOCATION			
DATE OF PUBLIC HEARING (if applicable)	LOCATION OF PUBLIC HEARING (if applicable)		
DATE OF DECISION MEETING	LOCATION OF DECISION MEETING		
DECISION TYPE: <input type="checkbox"/> NON-RENEWAL <input type="checkbox"/> REVOCATON			
BASIS FOR DECISION (check all applicable): <input type="checkbox"/> ACADEMIC <input type="checkbox"/> ORGANIZATIONAL <input type="checkbox"/> FISCAL			