

Alternative Education – School Information – 2003

➤ *Complete this form and attach it to your Agreement when you send it to the Ministry.*

School contact information

Name of school

School address

Phone Fax

Contact person for AE matters

Position of contact person

Does this person have delegated authority to sign reports on behalf of the principal? **Yes / No**

Principal Date
(Name) (Signature)

Information about the educational programme(s) to be provided

➤ **Will your school run the AE Programme** or is the school working with one or more community partners?

School alone **Yes / No** Community partner(s) **Yes / No** Number of partners

➤ **Complete the details below** about any alternative provider(s) or community group(s) with whom the Board intends to work in partnership. Continue overleaf if you have more partners.

Partner('s) name(s)

Contact person(s)

Partner('s) address(es)

Phone(s)

➤ **Attach to this form** a brief summary, no more than one page, of information about the educational programme(s) to be provided.