



State Public Charter School Commission 2018 Intent to Apply Packet

INTENT TO APPLY PACKET

I. Cover Sheet

Proposed School Name	
Name:	IMAG Academy
Primary Contact Information	
Name:	Sheila Buyukacar
Mailing Address:	[REDACTED]
Phone:	[REDACTED]
Email:	sbuyukacar@gmail.com

Type of charter school (select one)

<input checked="" type="checkbox"/>	1. Start-up charter school, as defined in HRS Chapter 302D
<input type="checkbox"/>	2. Conversion charter school, as defined in HRS Chapter 302D Name of DOE school to be converted: Click or tap here to enter text.

Type of applicant group to establish an Applicant Governing Board (select one)*

<input checked="" type="checkbox"/>	2. Community group
<input type="checkbox"/>	3. Group of teachers
<input type="checkbox"/>	4. Group of teachers and administrators
<input type="checkbox"/>	5. DOE school (<i>conversion charter school applications only</i>)
<input type="checkbox"/>	6. School community council (<i>conversion charter school applications only</i>)
<input type="checkbox"/>	7. Nonprofit organization (<i>components 4-7 of the Intent to Apply Packet listed below are required</i>)** Name of nonprofit organization: Click or tap here to enter text.

Submit the following mandatory components of the Intent to Apply Packet:

<input checked="" type="checkbox"/>	1. Completed Intent to Apply Packet Cover Sheet
<input checked="" type="checkbox"/>	2. Completed and executed Intent to Apply School Summary form
<input checked="" type="checkbox"/>	3. A resolution from the Applicant Governing Board approving the execution of the Intent to Apply Packet
<input type="checkbox"/>	4. Proof of nonprofit registration with the Hawaii Department of Commerce and Consumer Affairs and a Certificate of Good Standing (<i>applicable only if applicant type is nonprofit organization</i>)
<input type="checkbox"/>	5. Copy of the Articles of Incorporation for the nonprofit (<i>applicable only if applicant type is nonprofit organization</i>)
<input type="checkbox"/>	6. Copy of IRS tax-exempt certification - OR - acknowledgement letter from the IRS regarding the tax status of the nonprofit (<i>applicable only if applicant type is nonprofit organization</i>)
<input type="checkbox"/>	7. A resolution from the nonprofit's board approving the establishment of an Applicant Governing Board (<i>applicable only if applicant type is nonprofit organization</i>)

*Only applicant group types listed are eligible to establish an Applicant Governing Board.

**Only nonprofit organizations that provide components 4-7 are eligible to establish an Applicant Governing Board.

II. Intent to Apply School Summary

Describe the Applicant Governing Board, proposed school, and the nature of the plan to be presented in this application. The Applicant Governing Board must have members with academic management, financial management, human resources, and fundraising expertise to be eligible to submit an application.

Proposed School						
Name: IMAG Academy						
Geographic Location: Waipahu-Pearl City						
Location(s) of Anticipated Student Population: Waipahu						
Grades Served Year 1 (SY 2020-2021): K,1 6-9						
Grades Served at Capacity: K-12						
School Director						
Name (if identified): Click or tap here to enter text.						
Current job/position: Click or tap here to enter text.						
Applicant Governing Board Members						
Name: Deborah Bond-Upson	Email: dbondupson@gmail.com	Academic management expertise				
Name: Thelma Alane	Email: thelmaam@gmail.com	Financial management expertise				
Name: Ruby Menor	Email: rmenor77@gmail.com	Human resources expertise				
Name: Michael Nakata	Email: npfphawaii@gmail.com	Fundraising expertise				
Name: Randy Shiraishi	Email: randy.shiraishi@gmail.com	Other governance expertise (Youth Programs):				
Name: Shirley Ames	Email: shirl.ames@gmail.com	Other governance expertise (Property Mgt):				
Name: Sheila Buyukacar	Email: sbuyukacar@gmail.com	Other governance expertise (Organizational Mgt):				
Name: Harrison Peters	Email: hfpeters1@hotmail.com	Other governance expertise (Non-Profit Mgt):				
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify):				
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify):				
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify):				
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify):				
Anticipated Student Population						
Describe the student population you anticipate serving.	%FR L:	59%	% SpEd:	6%	% ELL:	20%
Other: Click or tap here to enter text.						

Proposed School Description

<p>School Model Specialty (check all that apply)</p>	<input type="checkbox"/> Alternative <input type="checkbox"/> Arts <input type="checkbox"/> Career and Technical Education <input type="checkbox"/> Cultural Focus <i>(specify)</i> : <input type="checkbox"/> Disability <i>(specify)</i> :	<input type="checkbox"/> Language Immersion <i>(specify)</i> : <input type="checkbox"/> Montessori <input type="checkbox"/> STEM <input type="checkbox"/> Virtual or Blended Learning <input checked="" type="checkbox"/> Other <i>(specify)</i> : Business, Arts, Science & Engineering
<p>In 100 words or less, describe the mission and vision of your proposed school</p>	<p>IMAG Academy will be an engaging, place and project-based learning environment.</p> <p>Our vision is to become a community resource raising generations of innovative, mindful, accepting, and giving citizens grounded in their knowledge and capabilities to create and sustain ethnically diverse, successful and peace-filled communities.</p> <p>Our mission is to provide a small, family-like environment to prepare mindful citizens through engaging our students in community centered concerns and projects. We focus on creating a continuum of experiences, in and outside of school, where the strengths and potential of the individual, family and community can flourish.</p>	

School Enrollment Projection

Academic Year	Projected # of Students	Grade Levels Served
Year 1 (2020-2021)	225	K-1, 6-9
Year 2 (2021-2022)	325	K-2, 6-10
Year 3 (2022-2023)	400	K-3, 6-11
Year 4 (2023-2024)	500	K-4, 6-12
Year 5 (2024-2025)	600	K-12
At Capacity (specify year): 2024-2025	600	K-12

Do any of the following describe the applicant governing board or the school to be proposed in the application?

- Will contract or partner with an Education Service Provider, Charter Management Organization, or other organization to provide school management services.
- Already operates schools in Hawaii.
- Already operates schools elsewhere in the United States.

If any of the boxes above are checked, fill out the table below.

Partner Information (if applicable)	
Education Service Provider or Charter Management Organization (includes existing charter school operators)	Name: Click or tap here to enter text. Primary Contact: Click or tap here to enter text. Mailing Address: Click or tap here to enter text. Phone: Click or tap here to enter text. Email: Click or tap here to enter text.

Does the applicant, any members of the applicant governing board, or any partners of the applicant have charter school applications under consideration by any other authorizer(s) in the U.S.?

- Yes (if so, complete this table, adding lines as needed) No

State	Authorizer	Proposed School Name	Application Due Date	Decision Date

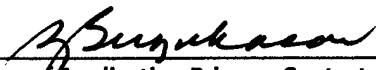
Does the applicant, any members of the applicant governing board, or any partners of the applicant have any new schools scheduled to open in the U.S. in the next five years?

- Yes (if so, complete this table, adding lines as needed) No

State	Authorizer	Proposed School Name	Grades Served	Opening Date

Certification

I certify that I have the authority granted by the Applicant Governing Board to submit this application and that all information contained herein is complete and accurate and that a copy of the governing board resolution approving the execution of the Intent to Apply Packet is attached. I recognize that any misrepresentation could result in disqualification from the application process or revocation after award. The person named as the contact person for the application is so authorized to serve as the primary contact for this application on behalf of the Applicant Governing Board.



 Signature of Application Primary Contact

 IMAG Academy Representative

 Title

 3/19/2018
 Date



To: State of Hawaii Public Charter School Commission
From: Applicant Governing Board – IMAG Academy
Date: March 17, 2018
Subject: Resolution to Approve Execution of Intent to Apply

To Whom It May Concern:

This letter certifies that the Applicant Board for IMAG Academy has approved the execution of the Hawaii State Charter Commission's Intent to Apply Packet, and duly intends to meet all requirements and expectations of the 2018 Request for Proposal for charter school approval in the state of Hawaii.

Respectfully,

Sheila Buyukacar
IMAG Academy Representative