

State Public Charter School Commission 2016-2017 Intent to Apply Packet

INTENT TO APPLY PACKET

I. Cover Sheet

Proposed School Name	
Name: Kilohana Academy	
Primary Contact Information	
Name: Kamealoha Smith	
Mailing Address: [REDACTED]	
Phone: [REDACTED]	
Email: [REDACTED]	

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: _____

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 (conversion charter school applications only)
<input type="checkbox"/>	6. School community council (conversion charter school applications only)
<input type="checkbox"/>	7. Nonprofit organization (components 3-6 of the Intent to Apply Packet listed below are required)** Name of nonprofit organization: _____

The components of the Intent to Apply Packet are as follows:

<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 (applicable only if applicant type is nonprofit organization)
<input type="checkbox"/>	5. Copy of the Articles of Incorporation for the nonprofit (applicable only if applicant type is nonprofit organization)
<input type="checkbox"/>	6. Copy of IRS tax-exempt certification - OR - acknowledgement letter from the IRS regarding the tax status of the nonprofit (applicable only if applicant type is nonprofit organization)
<input type="checkbox"/>	7. A resolution from the nonprofit's board approving the establishment of an Applicant Governing Board (applicable only if applicant type is nonprofit organization)

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

**Only nonprofit organizations that provide components 3-6 are eligible to establish an Applicant Governing Board.

I. 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: Kilohana Academy			
Opening Year: 2018			
Geographic Location: Kapaa, Puna, Kauai			
Location(s) of Anticipated Student Population: Halelea, Koolau, Puna, Kauai			
Grades Served Year 1: 6-8			
Grades Served at Capacity: 6-12			
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: Dr. Verlianne Malina-Wright	Email: [REDACTED]	Academic management expertise	
Name: Stu Rosenthal	Email: [REDACTED]	Financial management expertise	
Name: Bethany Compton	Email: [REDACTED]	Human resources expertise	
Name: Kamealoha Smith	Email: [REDACTED]	Fundraising expertise	
Name: Terry Lilly	Email: [REDACTED]	Other governance expertise (specify): Curriculum/Program Development expertise in Traditional Knowledge/Western Science	
Name:	Email: Click or tap here to enter text.	Other governance expertise (specify): X	
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify): Click or tap here to enter text.	
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify): Click or tap here to enter text.	
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify): Click or tap here to enter text.	
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify): Click or tap here to enter text.	
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify): Click or tap here to enter text.	
Name: Click or tap here to enter text.	Email: Click or tap here to enter text.	Other governance expertise (specify): Click or tap here to enter text.	
Anticipated Student Population			
Describe the student population you anticipate serving.	%FRL: 100%	% SpEd: 10%	% ELL: 0
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 checked="" type="checkbox"/> Career and Technical Education <input checked="" type="checkbox"/> Cultural Focus <i>(specify):</i> Click or tap here to enter text. <input type="checkbox"/> Disability <i>(specify):</i> Click or tap here to enter text.	<input type="checkbox"/> Language Immersion <i>(specify):</i> Click or tap here to enter text. <input type="checkbox"/> Montessori <input checked="" type="checkbox"/> STEM <input type="checkbox"/> Virtual or Blended Learning <input checked="" type="checkbox"/> Other <i>(specify):</i> Sustainable Development
<p>In 100 words or less, describe the mission and vision of your proposed school</p>	<p>We are a Year 6 to 12 Hawaiian-focused Bilingual School located in Puna, Kauai. School Activities/Curriculum are driven by needs of the community & are enhanced by a policy of continuous improvement. We update traditional knowledge to address community challenges for a sustainable future & partner with community to foster apprenticeship programs to prepare students to serve & lead in areas such as resource management, energy production, & engineering community planning. We educate students to walk confidently in both the mainstream and Hawaiian world and to look at real world issues through the lens of traditional knowledge & Western Studies</p>	

School Enrollment Projection

Academic Year	Projected # of Students	Grade Levels Served
Year 1 (2018-2019)	45	6-8
Year 2 (2019-2020)	60	6-9
Year 3 (2020-2021)	75	6-10
Year 4 (2021-2022)	90	6-11
Year 5 (2022-2023)	105	6-12
At Capacity (specify year): 2022-23	105	6-12

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 <i>(if applicable)</i>	
<p>Education Service Provider or Charter Management Organization (includes existing charter school operators)</p>	<p>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.</p>

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. 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

Title

[Handwritten Signature]
Virginia Intern Board President

10/6/16
 Date

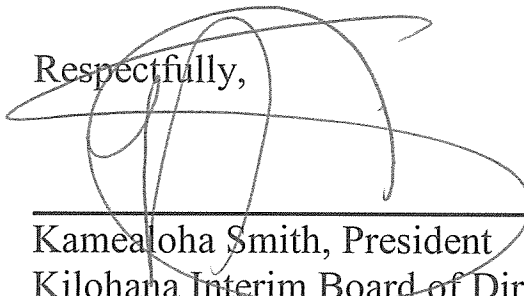
CONSENT RESOLUTION 2016
AUTHORITY OF THE KILOHANA BOARD PRESIDENT

WHEREAS Kamealoha Smith was recently appointed the Kilohana Interim Board President, effective October 1, 2016 and shall continue in this capacity for the duration of the Hawaii Charter School Application Process for 2016-2017;

RESOLVED, that the Kilohana Interim Board of Directors, authorizes, Kamealoha Smith, to submit the Letter of Intent to Apply to the Hawaii Charter School Commission. A vote was taken by phone proxy and Kamealoha Smith was given permission by interim board to sign off on this resolution.

This resolution was signed on Thursday, October 6, 2016.

Respectfully,



Kamealoha Smith, President
Kilohana Interim Board of Directors