## The Virginia Independent Schools Association

## **Application for Membership**



### Please attach the following to this application form:

- 1. Brief history of the school
- 2. Statement of the school's philosophy and objectives
- 3. School's stated admission policy as published and copy of the school's IRS letter of determination indicating 501(C)(3) status
- 4. Copy of school catalog / course descriptions
- 5. Copy of most recent financial statements, preferably the audit from previous year including the management letter
- 6. Copy of the current year budget

#### Kindly return this form with attachments and Application Fee of \$300.00 to:

Benjamin A. Vaughan, Executive Secretary Virginia Independent Schools Association Isle of Wight Academy P.O. Box 105 Isle of Wight, Virginia 23397

Telephone: 757-357-3866 FAX: 757-357-6886

# **APPLICATION FOR MEMBERSHIP**

	Date:				
Name of School:					
Address:					
T. 1					
Name of Foundation (if d	ifferent):				
Date of Founding: I		Date of Inco	Date of Incorporation:		
Officers (name and address) President:			Telephone		
Vice-President					
Secretary					
Treasurer					
Number of Directors	ctors		_ Executive Committee		
Grades Include (Circle) P	PS K 1 2	3 4 5 6 7 8 9	10 11 12 PG		
Enrollment by Grades Current Year:		Grades 1-7			
Last Year:					
3 Years Ago					
Total Cost Current Year:	Tuition	Trans	Transportation		
Last Year:					
3 Years Ago					

# **Secondary School Accreditation History Current Accreditations** This Year (check) No. of Years **Elementary School Accreditation History** This Year (check) No. of Years **Current Accreditations** School Head: Board Chairman: Signature of School Head:

Signature of Board Chair: \_\_\_\_\_