

**Application to Re-open/Operate a school within the
Southern Union Conference**

Conference:

Name of School applying to re-open and/or operate:

Address:

City/State/Zip:

Telephone:

Name of Principal:

Target date for opening/re-opening/operation:

Has local Conference risk management director been consulted regarding plans to open?

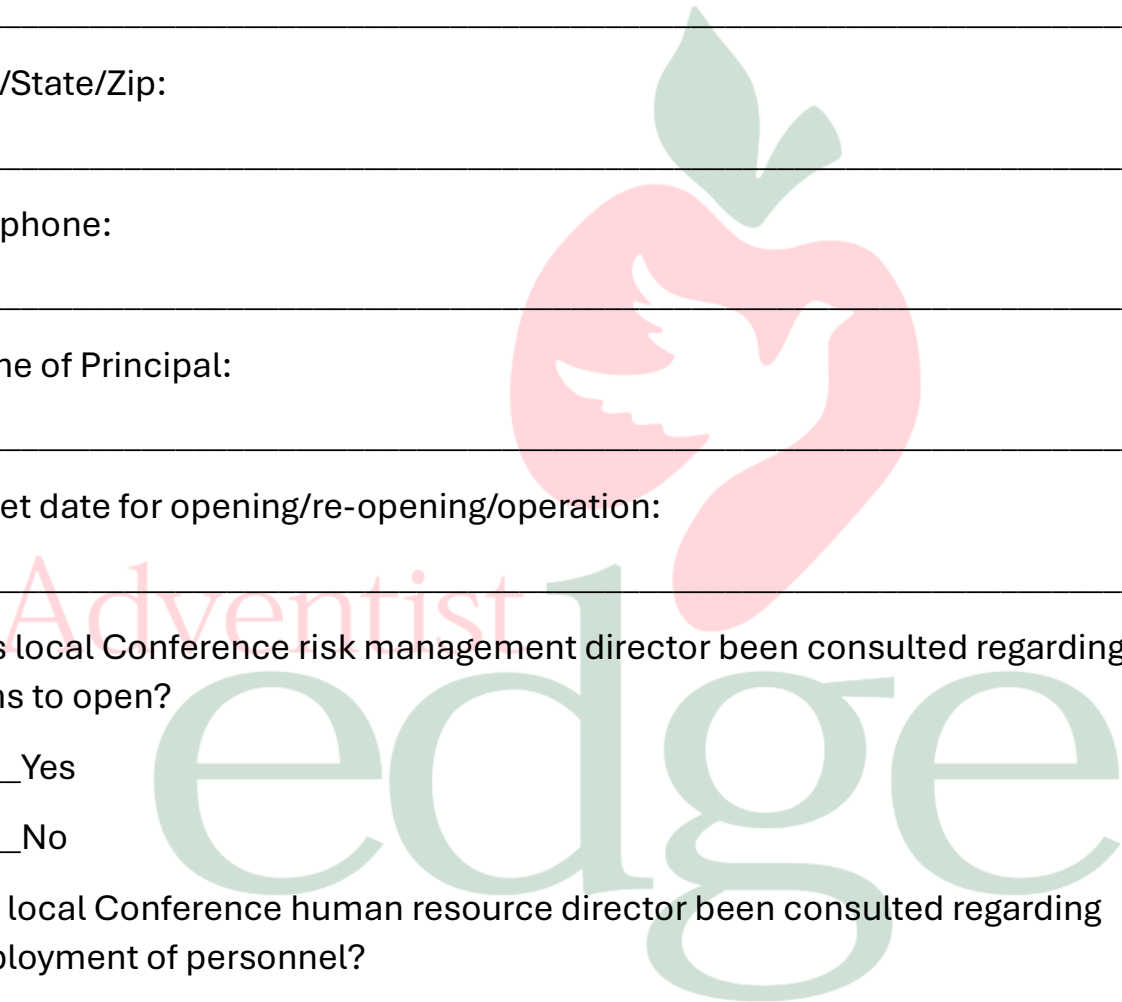
Yes

No

Has local Conference human resource director been consulted regarding employment of personnel?

Yes

No



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Desired grades of students to be served: _____

Local church/school board vote (Date): _____

Conference Board of Education vote (Date): _____

