



**NOTARIZED STATEMENT**

I, the undersigned, do consent and do solemnly swear (or affirm) that the information set forth in the forgoing application is true and complete to the best of my knowledge, and that failure to disclose pertinent information or the concealment of information or making false statements in the detailed application for operation of a charter school shall constitute valid grounds for refusal or revocation of permission to operate said school. The undersigned also affirms that the charter school herein named is obligated to enter into an agreement concerning the methods and procedures for the sponsor to monitor the progress of the charter school herein named. The undersigned affirms that the Department of Education and the sponsor are entitled to access to financial and other records relating to the operation of the charter school.

\_\_\_\_\_  
Signature of Member of the Committee to  
Form the School

\_\_\_\_\_  
Name Printed

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_  
date month year

(Notary Public Seal)

**MAIL/DELIVER TO:**

Nevada Department of Education  
ATTN: Charter School Consultant  
1749 Stewart Street, Suite 40  
Carson City, NV 89706-2543  
Telephone: 775-687-9149

**NO FAXED APPLICATIONS WILL BE ACCEPTED**