



**Nonpublic Schools, Including Homeschools,
Unaccredited by a Minnesota-recognized Accrediting Agency**

FULL REPORT

The person or nonpublic school in charge of providing instruction to a child must submit a Full Report to the superintendent of the school district where the child resides. **Do NOT mail to the Minnesota Department of Education.** Complete the information using this form or a written or electronic format of your choice

Information in the Full Report must be submitted **by October 1 of the first school year the student, ages 7-17, receives instruction; within 15 days of when a parent withdraws a child from public school after age seven to provide instruction in a nonpublic school that is not accredited by a state-recognized accrediting agency; within 15 days of moving out of a district; and by October 1 after a new resident district is established.** Submit the Letter of Intent to Continue to Provide Instruction by October 1 in subsequent years.

Date Report Completed:

Primary Instructor

Full Legal Name Last	First	Middle
Street Address (Not P.O. Box)		
City	State	ZIP
Home Phone (with area code)	Other Phone (with area code)	Email

Secondary Instructor, if any

Full Legal Name Last	First	Middle
Street Address (Not P.O. Box)		
City	State	ZIP
Home Phone (with area code)	Other Phone (with area code)	Email

Accreditation

Is the nonpublic school accredited by an accrediting agency recognized by the Minnesota Nonpublic Education Council?

- Yes No

If yes, provide the name of the accrediting agency and dates for which accreditation is granted:

Evidence of Instructor Qualifications

How is the instructor(s) qualified to instruct under Minnesota Statutes, section 120A.22, Subdivision 10? Check all that apply and attach required documentation.

- The instructor holds a current Minnesota teaching license for the field and grade level taught. (Attach copy of license.)
- The instructor is directly supervised by a licensed teacher. (Attach name of supervisor and copy of license.)
- The instructor has successfully completed a teacher competency exam. (Minnesota does not have an exam that meets this requirement so this option is not applicable.)
- The instructor holds a baccalaureate degree. (Attach a copy of diploma/degree.)
- The instructor is the parent or legal guardian of the child. (This means that unless an individual—including a grandparent or step-parent—is a licensed teacher or holds a bachelor's degree or is under the direct supervision of a Minnesota licensed teacher for each grade level and area, they may not instruct the student(s) in situations where the parent/legal guardian would be able to.)

Students

Attach immunization records or notarized statement of conscientious objection for each student. Update immunization information when each student reaches 7th grade (age 12).

Student's full legal name	Date of Birth (mm/dd/yyyy)	Grade Level (optional)	Address	Immunization statement attached?
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

Signature

Instructor Signature

Date

Maintaining and Submitting Documentation and Scores

Minnesota state law requires instructors in unaccredited schools to maintain information on curriculum, instruction and all required testing, including annual and supplemental tests, proof of testing administration and scores. This information must be submitted to the public school when enrolling as a public school student. It also must be submitted to the county attorney if requested in cases of educational neglect or reporting violations.

Proposed Testing Plan for New Students and Proposed Revisions for Existing Students.

Superintendent must mutually agree. Iowa Test of Basic Skills and Stanford Achievement tests are available from University of Minnesota Statewide Testing Program, (612) 626-1803. High school students may also consider the ACT college entrance exam online.

Full Name and Level of Nationally Normed Achievement Test	To Be Administered to the Following Students in Indicated School Year (s):	Name of Test Administrator	Test Location	DISTRICT USE <i>Superintendent Agrees to this plan for students in years specified</i>	DISTRICT USE <i>Superintendent DOES NOT AGREE: contact instructor immediately</i>
Iowa Test of Basic Skills, Grades K-2 (ITBS)				<input type="checkbox"/>	<input type="checkbox"/>
Iowa Tests of Basic Skills, Grades 3-8 (ITBS)				<input type="checkbox"/>	<input type="checkbox"/>
Iowa Tests of Educational Development, Grades 9-12 (ITED)				<input type="checkbox"/>	<input type="checkbox"/>
Stanford Achievement Test, Grades K-2 (SAT)				<input type="checkbox"/>	<input type="checkbox"/>
Stanford Achievement Test, Grades 3-8 (SAT)				<input type="checkbox"/>	<input type="checkbox"/>
Stanford Achievement Test, Grades 9-12 (SAT)				<input type="checkbox"/>	<input type="checkbox"/>
Other:				<input type="checkbox"/>	<input type="checkbox"/>