



Empower | Engage | Enrich

School Participation Agreement **2018 – 2019**

Please read the 2018-2019 school manual. There have been some program changes. After reviewing the manual, please check off each item below. This document must be signed by the school's primary administrator. If another individual handles the administrative requirements for the students and families receiving a SDPE Scholarship, s/he must also sign this document.

- I certify that this school is accredited by the South Dakota Department of Education.
- I certify that I have read the School Manual, understand and will comply with the policies and procedures for administering the South Dakota Partners in Education Tax Credit Scholarship for students enrolled in my school that are eligible and using those funds.
- I understand that failure to abide by Partners in Education policies and procedures will result in loss of payment or loss of eligibility as a participating school in the South Dakota Partners in Education Tax Credit Scholarship program.
- I certify that I understand that I must login to my school's private portal at www.sdpartnersinedu.org and enter information on my school and the students who are receiving a scholarship while attending my school.

School Name

Mailing address where checks will be sent.

Primary Administrator (print)

Primary Administrator (signature)

Date

If the person who will be responsible for the documentation requirements of the program (verifying students and payments, submitting school forms, etc.) is different than the person named above, that individual must also sign below.

Scholarship Administrator (print)

Scholarship Administrator (signature)

Date

Scholarship Administrator Email

*Please sign, scan and email this form to sdpartnersinedu@gmail.com.
Please mail the original along with a listing of member and non-member tuition and fees to the mailing address below. Please submit this form along with tuition and fee information by **August 1st**.*