

**Please type. Submit application and supplemental information in triplicate.**

School (correct legal title): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Accreditation**

Which agency(ies) or group(s) have accredited the school? Please check all that apply.

Middle States: \_\_\_\_\_ Date: \_\_\_\_\_

SAIS: \_\_\_\_\_ Date: \_\_\_\_\_

AIMS: \_\_\_\_\_ Date: \_\_\_\_\_

VAIS: \_\_\_\_\_ Date: \_\_\_\_\_

NAEYC: \_\_\_\_\_ Date: \_\_\_\_\_

Other: \_\_\_\_\_ Date: \_\_\_\_\_

Is(are) listed accreditations up-to-date? \_\_\_\_\_

Is your school in the process of applying for accreditation? \_\_\_\_\_ If so, please name the accrediting group: \_\_\_\_\_

**Governance**

Date founded (month and year): \_\_\_\_\_

Date opened: \_\_\_\_\_

Date incorporated not for profit: \_\_\_\_\_

Religious affiliation, if any: \_\_\_\_\_

How many trustees are there? \_\_\_\_\_

How are trustees chosen? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How long is their term of office? \_\_\_\_\_

How often do they meet? \_\_\_\_\_

Chair of the governing board (see also p.4 No. 7): \_\_\_\_\_

**Plant**

Size of school grounds: \_\_\_\_\_

How many buildings are used by the school? \_\_\_\_\_

Number of classrooms: \_\_\_\_\_

Is any portion of the school's plant leased? \_\_\_\_\_

(If so, please submit a copy of the contract or letter of agreement for the current year.)

What types of facilities does the school have? Please check all that apply.

- Art Studio
- Computer Laboratory
- Dining Room
- Gym
- Infirmary
- Kitchen
- Library; number of volumes: \_\_\_\_\_
- Music Room
- Science Laboratory
- Teacher Workspace
- Other:: \_\_\_\_\_

Describe space for outdoor recreation: \_\_\_\_\_

Date and result of most recent health inspection: \_\_\_\_\_

Date and result of most recent fire inspection: \_\_\_\_\_

**Administration**

Head of School: \_\_\_\_\_

Official Title: \_\_\_\_\_

Degrees and education: \_\_\_\_\_

Former positions/experience: \_\_\_\_\_

Administrative positions: please check all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Assistant Head             | <input type="checkbox"/> Department Heads (please list):<br>_____ |
| <input type="checkbox"/> Head of Upper School       | <input type="checkbox"/> Director of Development                  |
| <input type="checkbox"/> Head of Middle School      | <input type="checkbox"/> Director of Studies/Academic Dean        |
| <input type="checkbox"/> Head of Lower School       | <input type="checkbox"/> Financial Aid Officer                    |
| <input type="checkbox"/> Admissions Director        | <input type="checkbox"/> School Counselor                         |
| <input type="checkbox"/> Alumni (ae) Director       | <input type="checkbox"/> Librarian                                |
| <input type="checkbox"/> Bookkeeper                 | <input type="checkbox"/> Nurse                                    |
| <input type="checkbox"/> Business Officer           | <input type="checkbox"/> Public Relations Director                |
| <input type="checkbox"/> College Advisor            | <input type="checkbox"/> Summer Camp Director                     |
| <input type="checkbox"/> Dean of Students           |   |
| <input type="checkbox"/> Other (please list): _____ |   |

**Faculty**

Number of teaching staff: \_\_\_\_\_

Full time: \_\_\_\_\_ Part time: \_\_\_\_\_

Is financial support given for:

\_\_\_\_\_ Conferences/Seminars/Workshops

\_\_\_\_\_ Graduate schooling

\_\_\_\_\_ Health benefits

\_\_\_\_\_ Disability

\_\_\_\_\_ Retirement

\_\_\_\_\_ Other fringe benefits

What is the average size of the teaching sections? \_\_\_\_\_

What is the salary range for full-time teachers?

Starting: \$ \_\_\_\_\_

Median: \$ \_\_\_\_\_

Highest: \$ \_\_\_\_\_

Please review AISGW's [Principles of Good Practice on Hiring of Faculty and Staff](#). All AISGW member schools are encouraged to consider these Principles in assessing their operations and practices. Would your school need to make any changes to its current practices in order to follow them? If yes, please explain:

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**Students**

Grades included (please circle below)

Pre-school   K   1   2   3   4   5   6   7   8   9   10   11   12   Post-grad

Enrollment:

Last year:

This year:

Day:

Boys: \_\_\_\_\_

\_\_\_\_\_

Girls: \_\_\_\_\_

\_\_\_\_\_

Boarding:

Boys: \_\_\_\_\_

\_\_\_\_\_

Girls: \_\_\_\_\_

\_\_\_\_\_

Describe the admission process: \_\_\_\_\_

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What student organizations and/or extracurricular activities are offered? \_\_\_\_\_

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Financial aid:

Total amount granted in the most recent full year: \$ \_\_\_\_\_ which is \_\_\_\_\_% of tuition income.

Number of students aided: \_\_\_\_\_ which is \_\_\_\_\_% of the total enrollment.

How is financial aid funded? \_\_\_\_\_

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How does the school determine who shall receive financial aid? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of parent organization(s): \_\_\_\_\_  
What does this/these organization(s) do for the school? \_\_\_\_\_  
\_\_\_\_\_

Please review AISGW's [Principles of Good Practice on Admission and Financial Aid](#). All AISGW member schools are encouraged to consider these Principles when assessing their operations and practices. Would your school need to make any changes to its current practices in order to follow them? If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Finances**

If tuitions do not cover the cost of operating the school, what methods are used to raise funds to cover expenses? \_\_\_\_\_  
\_\_\_\_\_

Describe annual giving and fundraising activities. \_\_\_\_\_  
\_\_\_\_\_

Who does the school's audit? \_\_\_\_\_  
\_\_\_\_\_

**Statement on Equity and Justice & Statement on Ranking**

In addition to the Principles of Good Practice referenced above, AISGW has issued a [Statement on Equity and Justice](#) and a [Statement on Ranking](#), which describe a set of standards that AISGW seeks to embody in its practices and encourage among its membership. Please review these Statements and consider whether your school would need to make any changes to its current practices in order to follow them.

**References (optional)**

It is sometimes useful for AISGW to contact other independent school heads who are familiar with the applicant school and can provide additional information in support of its application for membership to AISGW. Please list below the names and addresses of any references, preferably heads of AISGW member schools, who we may contact for more information about the institution and its administration.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

**Please send three copies of each of the following with this application:**

1. \_\_\_\_ Brief history of the school
2. \_\_\_\_ Statement of the school's philosophy
3. \_\_\_\_ The school's bylaws
4. \_\_\_\_ School catalog/brochure
5. \_\_\_\_ Photocopy of determination letter which exempts the school from federal income tax as an organization described in section 501(c)(3) of the Internal Revenue Code
6. \_\_\_\_ Professional audit for the fiscal year immediately preceding this application for membership
7. \_\_\_\_ Information as to the school's sponsorship, including a listing of names and occupations of current trustees
8. \_\_\_\_ Faculty list including information on educational background of each teacher for the current year, current responsibility, years at school, years of experience
9. \_\_\_\_ Copy of lease, if any
10. \_\_\_\_ Tuition scale and fees
11. \_\_\_\_ Ways in which the school's facilities are used by outsiders
12. \_\_\_\_ List of schools or colleges which your graduates entered last year

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Signature, Head of School

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Date of application