

SECTION III SCHOOL STRUCTURE/OWNERSHIP INFORMATION

The structure of the school ownership is: (select one):

Sole Proprietorship

Partnership

Corporation

Other (Specify)
PUBLIC SCHOOL

PROVIDE THE NAMES AND TITLES OF OWNERS, PARTNERS, OFFICERS BELOW (use additional sheet of paper if necessary)

LAST NAME FIRST NAME MI
 C L A Y C O U N T Y S C H O O L B O A R D

ADDRESS
 9 0 0 N O R T H W A L N U T S T R E E T

CITY STATE ZIPCODE +4
 G R E E N C O V E S P R I N G S F L 3 2 0 4 3 -

TITLE
 S C H O O L B O A R D

LAST NAME FIRST NAME MI

ADDRESS

CITY STATE ZIPCODE +4

TITLE

LAST NAME FIRST NAME MI

ADDRESS

CITY STATE ZIPCODE +4

TITLE

SECTION IV AFFIRMATION AND NOTARIZATION

I affirm that this school has adopted the curriculum as outlined in Section 5N-1.140(1), Florida Administrative Code, and that all instructors utilized by this school, unless specifically exempted by rule, will be licensed as required by Section 5N-1.138, Florida Administrative Code. I also affirm that required property damage and personal injury liability insurance coverage in an amount not less than \$50,000 has been purchased and shall continue in force and effect so long as the school/facility is in operation. I understand that falsification or misrepresentation of any document may subject me to criminal prosecution under Section 837.06, Florida Statutes.

Signature of Applicant

Date Signed

STATE OF FLORIDA
 COUNTY OF _____

The foregoing application was sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by:

Print Name of Applicant

NOTARY SIGNATURE

Personally Known Produced Identification

PRINT, TYPE, OR STAMP NAME OF NOTARY

Type of Identification Produced _____