

THE SOUTH CAROLINA INDEPENDENT SCHOOL ASSOCIATION

Membership Application Form

Instructions: Upon completion of this form, please make a copy for your records and

Email to: administration@scisa.org

or

Mail to: The South Carolina Independent School Association
P. O. Drawer 690
Orangeburg, S. C. 29116

Important: (Please include written directions to your school when emailing or mailing this form)

Phone: 803.535.4820

Fax: 803.535.4840

Please Type:

NAME OF SCHOOL: _____

HEAD OF SCHOOL PHONE #

MAILING ADDRESS FAX #

PHYSICAL ADDRESS

E-MAIL WEB ADDRESS

YEAR SCHOOL FOUNDED

IS YOUR SCHOOL APPLYING FOR FULL MEMBERSHIP (WHICH INCLUDES ATHLETICS)? YES NO

IS YOUR SCHOOL APPLYING FOR ACADEMIC MEMBERSHIP? YES NO

DOES YOUR SCHOOL MEET OR EXCEED SCISA'S ACCREDITATION REQUIREMENTS YES NO

Please list on the back of this page any accreditation standard(s) about which you would request SCISA staff support.

STUDENT ENROLLMENT INFORMATION

TOTAL KINDERGARTEN (include all 3, 4, & 5K):

TOTAL ELEMENTARY:

TOTAL MIDDLE SCHOOL:

TOTAL HIGH SCHOOL:

GRAND TOTAL ALL STUDENTS: