

**TENNESSEE ASSOCIATION OF NON-PUBLIC ACADEMIC SCHOOLS  
AGENCY APPROVAL APPLICATION  
CATEGORY II**

**I. IDENTIFYING INFORMATION**

School \_\_\_\_\_  
Street \_\_\_\_\_  
P.O. Box \_\_\_\_\_  
City \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_  
School Phone \_\_\_\_\_  
Fax Number \_\_\_\_\_ E-mail address \_\_\_\_\_  
School's web page \_\_\_\_\_  
Year School Founded \_\_\_\_\_

Administrator \_\_\_\_\_ Phone \_\_\_\_\_

Sponsoring Church \_\_\_\_\_  
Church Affiliation \_\_\_\_\_  
Denomination or Fellowship \_\_\_\_\_  
Pastor \_\_\_\_\_ Phone \_\_\_\_\_  
Year Church Founded \_\_\_\_\_

**II. SCHOOL BOARD MEMBERS:**

<u>NAME</u>	<u>OCCUPATION</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



**I. STAFFING**

<u>Staff</u>	<u>#Full Time</u>	<u>#Part Time</u>
Administrator/Principal (State Certified)	_____	_____
Administrator/Principal (Non-Certified)	_____	_____
Teachers K-8 (State Certified)	_____	_____
Teachers K-8 (Non-Certified)	_____	_____
Teachers 9-12 (State Certified)	_____	_____
Teachers 9-12 (Non-Certified)	_____	_____
Teacher Aides	_____	_____
Secretaries	_____	_____
Custodial	_____	_____
Cafeteria Staff	_____	_____

1. How many teachers left your staff at the end of last school year?

\_\_\_\_\_

2. How many teachers joined the staff at the beginning of the present year? \_\_\_\_\_

**VI. CURRICULUM**

Traditional: State Approved Text

A Beka

Bob Jones

Individualized: Alpha Omega Publications

School of Tomorrow (ACE)

Grades 9-12 (Please list all high school courses offered)

Grade 9 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Grade 10	_____	_____
	_____	_____
	_____	_____
	_____	_____
Grade 11	_____	_____
	_____	_____
	_____	_____
	_____	_____
Grade 12	_____	_____
	_____	_____
	_____	_____
	_____	_____

**VII. ENROLLMENT**

(please list approximate number of students enrolled in each grade)

*Day School Enrollment*

K5 _____	1 <sup>st</sup> _____	2 <sup>nd</sup> _____	3 <sup>rd</sup> _____	4 <sup>th</sup> _____
5 <sup>th</sup> _____	6 <sup>th</sup> _____	7 <sup>th</sup> _____	8 <sup>th</sup> _____	
9 <sup>th</sup> _____	10 <sup>th</sup> _____	11 <sup>th</sup> _____	12 <sup>th</sup> _____	Sp/Ed _____

*Pre-School Enrollment*

Infants \_\_\_\_\_ Toddlers \_\_\_\_\_ K-3 \_\_\_\_\_ K-4 \_\_\_\_\_

*Home School Enrollment*

K5 _____	1 <sup>st</sup> _____	2 <sup>nd</sup> _____	3 <sup>rd</sup> _____	4 <sup>th</sup> _____
5 <sup>th</sup> _____	6 <sup>th</sup> _____	7 <sup>th</sup> _____	8 <sup>th</sup> _____	
9 <sup>th</sup> _____	10 <sup>th</sup> _____	11 <sup>th</sup> _____	12 <sup>th</sup> _____	

**VI. VIII. FACILITY**

Being a member of TANAS does not exempt church schools from meeting health and safety standards. (TCA 49-50-801)

Each church-related school must have one facility with said facility meeting zoning and safety standards. A personal residence does not qualify as a facility. If a school serves hot lunches, a health permit is required.

Please enclose a copy of whichever is applicable:

Fire Inspection Report  
Approval letter from Local Fire Chief  
Health Department Permit  
Certificate of Occupancy

**IX. AGENCY APPROVAL FEE SCHEDULE**

Accreditation fee: \$ 300.00 + travel, meals, and lodging expenses of the evaluative team + \$50.00 compensation per day for each evaluative team member.

The accreditation fee of \$ 300.00 is due on the date of the on-site inspection. Schools will be billed for travel, meals, lodging expenses and team member compensation.

**X. STATEMENT OF FAITH**

*We believe the Bible to be the inspired Word of God and our Standard for faith and practice.*

*We believe in God as revealed in the Bible. He, as our eternal heavenly Father, is the author of truth, love, and faith.*

*We believe in the deity of the Lord Jesus Christ, in His virgin birth, in His sinless life, in His vicarious and atoning death, in His bodily resurrection, and in His second coming.*

*We believe in the Holy Spirit who empowers for service and reveals Jesus in us.*

*We believe that man was created in the image of God, fell through disobedience and is saved through faith in Jesus Christ.*

**X. AUTHORIZED SIGNATURE**

This is our school’s application for membership in the Tennessee Association of Non-Public Academic Schools. I understand that membership is on an annual basis. My signature affirms that our school endorses and practices the TANAS Statement of Faith.

If our organization’s application for membership is accepted, we agree that our membership may be revoked at any time by a duly appointed officer of TANAS, on refund of the pro rata part of our dues paid in advance.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

Additional Information or Comments \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**TANAS Use Only**

Date Application Received: \_\_\_\_\_

Payment: \_\_\_\_\_ Check Number: \_\_\_\_\_

Amount Received: \_\_\_\_\_ Balance Due: \_\_\_\_\_

Second Payment Received: \_\_\_\_\_

Total Students: Pre \_\_\_\_\_ Date \_\_\_\_\_ Check Number \_\_\_\_\_  
K-8 \_\_\_\_\_ 9-12 \_\_\_\_\_ H.S. \_\_\_\_\_

Total Teachers: \_\_\_\_\_

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**TANAS**

**P.O. BOX 411**

**HOHENWALD, TN 38462-0411**

**931-796-4348**

**Website: [www.tanasonline.org](http://www.tanasonline.org)**

**Primary e-mail: [mainoffice@tanasonline.org](mailto:mainoffice@tanasonline.org)**

**Secondary (Accreditation) e-mail: [cattwo@tanasonline.org](mailto:cattwo@tanasonline.org)**