



Early Childhood, Special Education and Title Services

Kansas State Department of Education
Landon State Office Building
900 SW Jackson Street, Suite 620
Topeka, Kansas 66612-1212

(785) 291-3097
(800) 203-6462
(785) 291-3791 - fax

www.ksde.org

TO: Non-Accredited Private School Officials

SUBJECT: Non-Accredited Private School Registration

To comply with the provisions of K.S.A. 72-53,100 through 72-53,102 (see enclosed Kansas Statute document), please provide the information on the form below concerning your non-accredited private school (elementary or secondary). After completing this form **make copies for your files and for the school from which your student is withdrawn.**

Please provide all information requested below and return the entire page to:

Non-Accredited Private School
Attn: Tate Toedman
Early Childhood, Special Education and Title Services
900 SW Jackson Street, Suite 620
Topeka, Kansas 66612-1212

You need not register every year. If your name or address should change, please fill out a "Change of Address Form." If you have questions concerning this form, please call (785) 368-7088 or email tlutze@ksde.org or ttoedman@ksde.org.

This registration is NOT for the purpose of enrolling in a Kansas approved virtual entity.

NON-ACCREDITED PRIVATE SCHOOL REGISTRATION

Starting School Year: _____
Current Year

Name of Your Private School: _____

*Phone: _____ County: _____

Street Address: _____

City: _____ Zip Code: _____

*E-Mail Address: _____

Name of Private School Official

Custodian: _____

*Phone: _____ County: _____

Street Address: _____

City: _____ Zip Code: _____

Only if information is different from Custodian.

Name of Parent (Guardian): _____

*Phone: _____ County: _____

Street Address: _____

City: _____ Zip Code: _____