







## **COOPERATIVE INNOVATIVE HIGH SCHOOL RENEWAL FORM**

Cooperative Innovative High School (CIHS) Name:		CIHS School Number:
Local Education Agency (LEA) Name:		LEA Number:
Institution of Higher Education (IHE) Partner Name:		
Name of Person Submitting Form:		Submission Date:
	The school district and partner institution(s) named above request renewal of the Cooperative Innovative High School agreement originally submitted.  The school district and partner institution(s) named above do not request renewal of the Cooperative Innovative High School agreement originally submitted.	
If requesting renewal, the intention is to:  Continue operations as specified in the original agreement.  Continue operations as specified in the original agreement, with the following modifications:  Explain:		
THIS RENEWAL FORM IS VALID FOR FIVE ACADEMIC YEARS.		
	NCDPI, Division of Advanced Learning, Sneha Shah Coltrane, Director, 6307 Mail Service Center, Raleigh, NC 27699-6307	Email to: <u>CIHS@dpi.nc.gov</u>
CIHS PARTNER SIGNATURES:		
	Chairperson, Local Board of Education	Date
	Superintendent, Local Education Agency	Date
	Chairperson, Governing Board of IHE Partner	Date
	President, IHE Partner	Date
NCDPI, NCCCS, UNCGA, NCICU USE ONLY SIGNATURES:		
	Chairperson, State Board of Education	Date
	Chairperson, Governing Board of IHE Partner	Date