

**South Carolina Education Oversight Committee  
Annual Standards Assurance Form**

**S.C. Budget Proviso 1.80  
2014-2015**

Please complete the information requested below concerning your independent school. This information will be listed on the South Carolina Education Oversight Committee's website, [www.eoc.sc.gov](http://www.eoc.sc.gov).

<b>Independent School Name:</b>	
<b>Independent School Contact Person:</b>	
<b>Independent School Address:</b>	
<b>City, State, Zip Code:</b>	
<b>Independent School Telephone Number:</b>	(     ) -
<b>Independent School Fax Number:</b>	(     ) -
<b>Independent School E-mail Address:</b>	
<b>Independent School Website Address:</b>	

Please review the standards below based on **S.C. Budget Proviso 1.80**. Please indicate whether your school has met each standard to ensure the following academic requirements are being met. The S.C. Education Oversight Committee reserves the right to **request documentation** to show the school's standards is in compliance with the Budget Proviso.

STANDARDS	YES	NO
1. Offers a general education to primary or secondary school students.	<input type="checkbox"/>	<input type="checkbox"/>
2. Does not discriminate on the basis of race, color, or national origin.	<input type="checkbox"/>	<input type="checkbox"/>
3. Is located in this state.	<input type="checkbox"/>	<input type="checkbox"/>
4. Has school facilities that are subject to applicable federal, state, and local laws.	<input type="checkbox"/>	<input type="checkbox"/>
5. Is a member in good standing of the Southern Association of Colleges and Schools, the South Carolina Association of Christian Schools or the South Carolina Independent Schools Association.	<input type="checkbox"/>	<input type="checkbox"/>
6. Has an educational curriculum that includes courses set forth in the state's diploma requirements and where the students attending are administered national achievement or state standardized tests, or both, at progressive grade levels to determine school progress.	<input type="checkbox"/>	<input type="checkbox"/>

I assure that annually our school will report assessment data as requested.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name of Signature Above:** \_\_\_\_\_

**Title:** \_\_\_\_\_

Return this form to Melanie Barton .

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