

Letter of Intent Form

Dear Missouri Charter Public School Commission:

The undersigned individual/organization is considering submission of an application to establish a charter school in Missouri.

Legal name of non-profit organization applying: Hi-Tech Charities, Inc.

Name of proposed school: Hi-Tech Healthcare Charter School

Applicant's authorized representative: Chidimma Nwankwere

Full mailing address: 23 North Oaks Plaza, Ste. 275

City: St. Louis

State: MO **Zip:** 63121

Daytime telephone number: 314-389-5737

Cell phone number: 314-450-0754

E-mail address: nkchy_chidi@sbcglobal.net

Describe the student population this school serves: The school will serve any student who is eligible for a



New school



Replication of an existing school

If you are replicating an existing design, please indicate locations of other schools: N/A

Name of the charter management organization (CMO), if any: N/A

Briefly describe the theme or emphasis of school:

Hi-Tech Healthcare Charter School (HHCS), utilizing a STEM (Science, Technology, Engineering, and Mathematics) model, will provide a rigorous academi

In one or two sentences, provide a clear statement that defines the purpose (mission) and nature of your school.

The mission of Hi-Tech Healthcare Charter School (HHCS) is to provide an academically rigorous, highly individualized education empowe

Address of school (if known): In Process

Anticipated dates to open** 08/17

Will you seek LEA status** YES NO

Grade levels served in year 1 6 and 7

Grade level served at full capacity** K - 12

Anticipated enrollment in year 1: 200

Anticipated enrollment at full capacity: 1036



Signature of Applicant's Authorized Representative

07/18/16

Date