



Appendix D: School Profile Form, 20th ed.

_____ DATE SUBMITTED

An editable, PDF version of this document is available on the ISACS website.

To be submitted with each of the following reports (please indicate in space provided):

- Self-Study & Visiting Team Report Progress Report Provisional Member Annual Report
- Reaction Report Interim Visit Report New Application for Membership

School Name: _____ Address: _____

City, State, Zip: _____

Head of School: _____ Date Appointed: _____

Type of School: _____

(Please reference any religious affiliation, specialized instructional method/philosophy, specific student population served, college preparatory, etc.)

Mark all that apply: Coed Boys Only Girls Only Host International Students (SEVP)
 Boarding/Day Boarding Only Day Only

Grades Served, from PS-PG: _____ Current Enrollment: _____

Distinctive school programs: _____

(Experiential education, capstone experiences, project-based learning, STEM, International Baccalaureate, etc.)

Size of Campus: _____ Square Footage of Buildings: _____

Date Founded: _____ Dates of last ISACS accreditation visit: _____

Dates of last 2 full-opinion financial audits: _____

Financial audit schedule (e.g., annual, every other year): _____

Date current mission statement was affirmed by governing body: _____

Status of current strategic planning with date of last action by board of trustees: _____

Year the most recent School Community Survey was conducted: _____

Has your school added any of the following since your last accreditation visit?

Additional Grade(s) If so, date of addition _____ Grade(s) added: _____

Additional Campus(es) If so, date of addition: _____ Location (city, state) _____

Infant and/or Preschool If so, date of addition: _____ Age(s) served: _____

International Students in Homestays (SEVP) If so, date of addition: _____

Boarding Program If so, date of addition: _____ Grades Included: _____

(Continued on Next Page)

Fill in all cells of the data sheet. Do not leave anything blank. Use N/A or \$0, if applicable.		3 Years Ago _____Year	1 Year Ago _____Year	Current Year Budget or YTD _____Year
Number of Board Members	Men			
	Women			
	Total			
	% of color			
 				
Number of Students	Boys			
	Girls			
	Total			
	% of color			
	% International			
 				
Tuition	Grade 1	\$	\$	\$
	Grade 6	\$	\$	\$
	Grade 12	\$	\$	\$
 				
Faculty FTE	Men			
	Women			
	Total			
	% of color			
 				
Administrators FTE	Men			
	Women			
	Total			
	% of color			
 				
Faculty Salaries	Low	\$	\$	\$
	Average	\$	\$	\$
	High	\$	\$	\$
	Median	\$	\$	\$
	 			
% of Benefits to Total Salaries				
% of Expenses to Salaries/Benefits				
% of Expenses to Professional Development				
 				
Need-Based Financial Aid	Total	\$	\$	\$
	% Student Body			
No-Need Financial Aid	Total	\$	\$	\$
	% Student Body			
Tuition Remission	Total	\$	\$	\$
	% Student Body			
% of Total Tuition Assistance to Gross Tuition & Fees				
 				
Cash Reserves (not included in endowment)		\$	\$	\$
Endowment Value		\$	\$	\$
Annual Giving – Total Received		\$	\$	\$
Capital Giving – Total Received		\$	\$	\$
Debt Owed		\$	\$	\$
Operating income from ALL sources except restricted funds		\$	\$	\$
 				