

OPEN-ENROLLMENT CHARTER CONTRACT RENEWAL APPLICATION

Section I. Current Information in Charter School Tracking System

Charter Holder Name: DALLAS COUNTY COMMUNITY COLLEGE DISTRICT
Charter School Name: RICHLAND COLLEGIATE HS OF MATH SCIENCE ENGINEERING
Charter School County/District #: 057-840
Generation: 11
Maximum Approved Enrollment: 900
Grades Approved: 11,12
Campuses:

057840001
RICHLAND COLLEGIATE HS OF MATH SCIENCE ENGINEERING
12800 Abrams Road
Dallas, TX 75243
Grade Levels Currently Served:
11,12

Geographical Boundary:

The original charter application and amendment history reflects that the following district(s) comprise the charter school's geographic boundary:

ALLEN ISD
ANNA ISD
ARGYLE ISD
ARLINGTON ISD
AUBREY ISD
AVALON ISD
AZLE ISD
BIRDVILLE ISD
BLUE RIDGE ISD
CARROLL ISD
CARROLLTON-FARMERS BRANCH ISD
CASTLEBERRY ISD
CEDAR HILL ISD
CELINA ISD
COMMUNITY ISD
COPPELL ISD
CRANDALL ISD
CROWLEY ISD
DALLAS ISD
DENTON ISD
DESOTO ISD
DUNCANVILLE ISD
EAGLE MT-SAGINAW ISD
ENNIS ISD
EVERMAN ISD
FARMERSVILLE ISD
FERRIS ISD
FORNEY ISD
FORT WORTH ISD
FRISCO ISD
GARLAND ISD
GRAND PRAIRIE ISD
GRAPEVINE-COLLEYVILLE ISD
HIGHLAND PARK ISD
HURST-EULESS-BEDFORD ISD
IRVING ISD
ITALY ISD
KAUFMAN ISD
KELLER ISD
KEMP ISD
KENNEDEALE ISD
KRUM ISD
LAKE DALLAS ISD
LAKE WORTH ISD
LANCASTER ISD
LEWISVILLE ISD
LITTLE ELM ISD
LOVEJOY ISD
MABANK ISD
MANSFIELD ISD
MAYPEARL ISD
MCKINNEY ISD
MELISSA ISD
MESQUITE ISD
MIDLOTHIAN ISD
MILFORD ISD
NORTHWEST ISD
PALMER ISD
PILOT POINT ISD
PLANO ISD
PONDER ISD
PRINCETON ISD
PROSPER ISD
RED OAK ISD
RICHARDSON ISD
ROCKWALL ISD
ROYSE CITY ISD
SAMNORWOOD ISD
SANGER ISD
SCURRY-ROSSER ISD
SUNNYVALE ISD
TERRELL ISD
WAXAHACHIE ISD
WELLINGTON ISD
WHITE SETTLEMENT ISD
WYLIE ISD

Section II. Contact Information

The persons listed below will be contacted by agency staff if there are issues to be resolved in any of the sections.

Superintendent Contact Information:

Superintendent's Name:	Kathryn K. Eggleston
Telephone Number:	972-238-6364
Fax Number:	972-238-6957
E-mail Address:	keggleston@dcccd.edu

Charter Holder Board Chair Contact Information:

Charter Holder Board Chair's Name:	Jerry M. Prater
Telephone Number:	972-840-1516
Fax Number:	214-860-2009
E-mail Address:	jprater@hphcpa.com

Application Preparer's Contact Information:

Contact Name:	David B. Canine
Telephone Number:	214-288-1706
Fax Number:	972-238-6957
E-mail Address:	dcanine@dcccd.edu

Charter School Website:

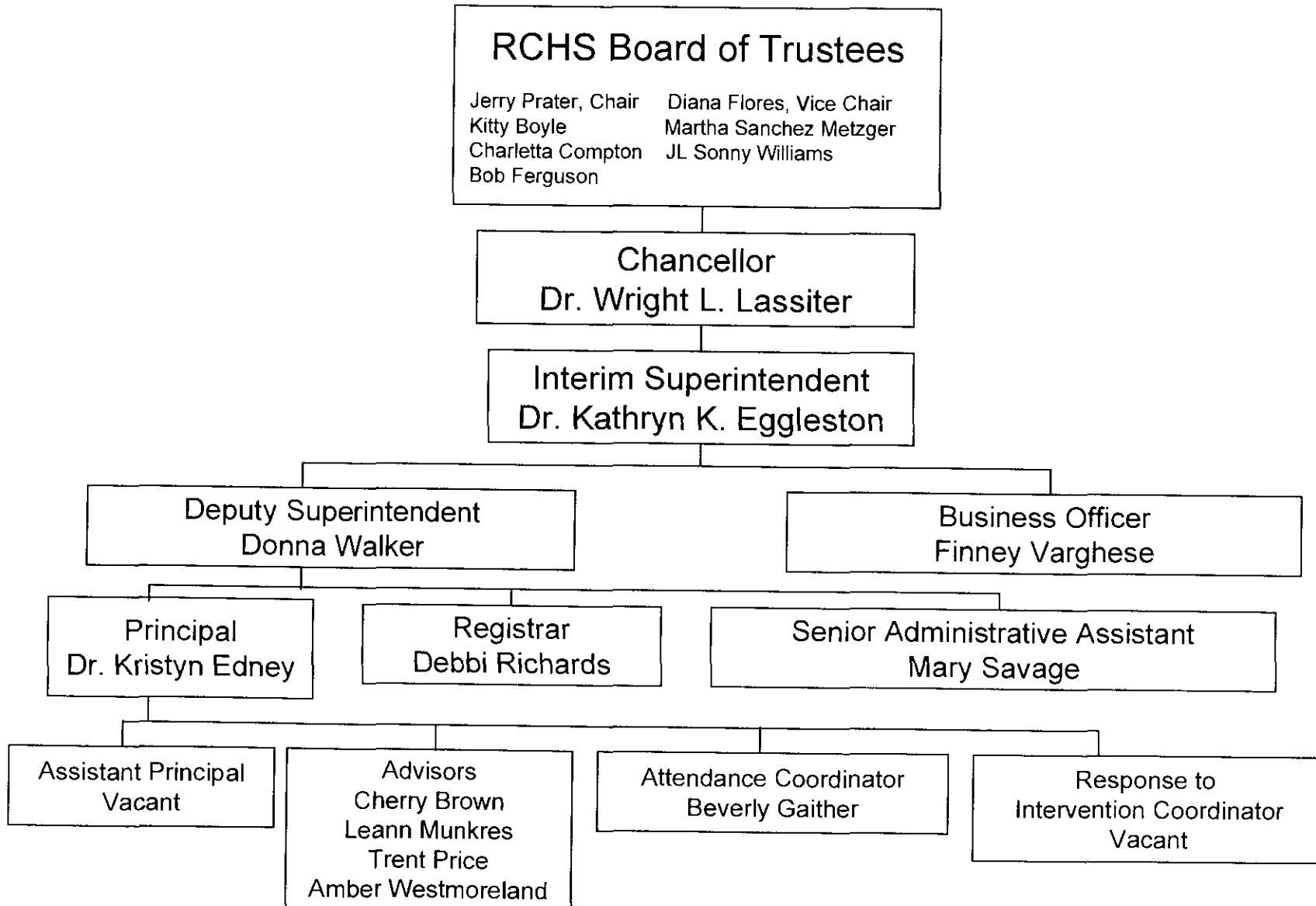
Web address if available:	www.richlandcollege.edu/rchs
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Section III. Organizational Charts

Submit, as **Attachment 1**, the organizational chart for the charter school that specifies the administrative positions including title and name of individual currently in each position.

Submit, as **Attachment 2**, a chart that identifies all other entities under the direction of the charter holder. This would include entities and/or programs that the charter holder governs/manages in addition to the charter school.

Section III Attachment I
**Richland Collegiate High School
of Mathematics, Science, and Engineering
Organizational Chart**



SECTION III – ATTACHMENT 2

Richland Collegiate High School of Mathematics, Science, and Engineering

Other entities under direction of the charter holder, Dallas County Community College District

Brookhaven College, Farmers Branch, TX

Cedar Valley College, Lancaster, TX

Eastfield College, Mesquite, TX

El Centro College, Dallas, TX

Mountain View College, Dallas, TX

North Lake College, Irving, TX

Richland College, Dallas, TX

Section IV. Admi:

A. Specify the period during which applications for admission are accepted. *TEC, §12.117, requires that a charter school establish a reasonable application deadline for the submission of applications for admission.*

Beginning of Period (Month/Day)	End of Period (Month/Day)
December 1	March 31

B. If the school admits students by lottery when the number of admissions applications received exceeds the number of available spaces, describe the procedures followed in conducting the lottery.

Type Below:

The lottery occurs in a public place on the Richland College campus. The names and addresses of eligible applicants are entered on paper cards of uniform size and color and placed into a closed container. The container is rotated to shuffle the cards which are drawn by a staff member of Richland College not affiliated with the RCHS. As the cards are drawn from the container, names of each person are announced and the cards are placed in the order drawn on a board for public display. All cards are drawn until the maximum enrollment is reached.

C. If the school utilizes a lottery when oversubscribed, are any categories of applicants exempted from the lottery?

Check One:

- Yes
- No
- Not applicable (because lotteries are not utilized)

If "Yes" was indicated in C above, state the categories of applicants that are exempted.

Type Below:

Siblings of returning students

D. If the school utilizes a lottery when oversubscribed, specify the approximate date on which a lottery will be conducted.

Approximate Date of Lottery
(Month/Day)

April 15

E. If the school does not utilize a lottery when oversubscribed, but rather fills the available positions in the order in which applications were received before the expiration of the application deadline (i.e., a "first-come, first-served" admission process), describe the manner in which the school notifies the community of the opportunity to apply for admission. *TEC, §12.117, requires a charter school that uses a first-come, first-served admission process when oversubscribed to publish a notice in a newspaper of general circulation not later than the seventh day before the application deadline.*

Type Below:

N/A

APPROVED DURING CONTINGENCY PROCESS

Section IV. Admission Policy

A. Specify the period during which applications for admission are accepted. *TEC, §12.117, requires that a charter school establish a reasonable application deadline for the submission of applications for admission.*

Beginning of Period
(Month/Day)

End of Period
(Month/Day)

December 1	March 31
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B. If the school admits students by lottery when the number of admissions applications received exceeds the number of available spaces, describe the procedures followed in conducting the lottery.

Type Below:

--

C. If the school utilizes a lottery when oversubscribed, are any categories of applicants exempted from the lottery?

Check One:

- Yes
- No
- Not applicable (because lotteries are not utilized)

RECEIVED
 JUN - 7 PM 5: 02
 LEGAL SERVICES

If "Yes" was indicated in C above, state the categories of applicants that are exempted.

Type Below:

Siblings of returning students

D. If the school utilizes a lottery when oversubscribed, specify the approximate date on which a lottery will be conducted.

Approximate Date of Lottery
(Month/Day)

June 15

E. If the school does not utilize a lottery when oversubscribed, but rather fills the available positions in the order in which applications were received before the expiration of the application deadline (i.e., a "first-come, first-served" admission process), describe the manner in which the school notifies the community of the opportunity to apply for admission. *TEC, §12.117, requires a charter school that uses a first-come, first-served admission process when oversubscribed to publish a notice in a newspaper of general circulation not later than the seventh day before the application deadline.*

Type Below:

N/A

F. If the school has a separate process for re-enrollment, state the process and the timeline to be used.

Type Below:

Students successfully completing the 11th grade who wish to return the next year must notify the Principal of this intent by the last day of the school year. Students who are eligible to return, but do not notify the Principal of their intent by this date, may return if a spot remains in the class at the time they do notify the Principal of their wish to return. However, this spot is not guaranteed after the last day of the school year.

G. State the procedures for processing applications received once the application deadline has passed.

Type Below:

Applications from students who will enter the 11th grade the following school year received before December 1 are held to be included in the pool of students applying to attend the RCHS starting the following school year. Applications from students received after the announced application cut-off date are held until the lottery has been conducted and a waiting list established. The names of these applicants are added at the end of the waiting list in the chronological order in which those late applications are received.

H. Describe the information that an applicant must provide in order to be considered for admission. *Applicants may not be required to provide copies of transcripts or other academic records until after they are offered admission and are enrolling. Furthermore, a student may not be precluded from enrolling due to the charter school's failure to receive information required for enrollment from the student's parent or guardian or previous school. See TEC, §25.002.*

Type Below:

An applicant for admission must provide his or her full name, the name(s) of parent(s) or guardian(s), current address, and telephone number (s) and e-mail address(es) as available. The applicant is asked to affirm that he or she has not been found guilty of a criminal offense, has not been adjudicated in a juvenile court, nor suspended with discipline problems as stated in Subchapter A, Chapter 37. This information is reviewed by a RCHS staff member to assure the applicant does reside within the geographic boundary and is not ineligible due to disciplinary issues.

I. The charter holder certifies that the non-discrimination statement required by TEC, §12.111(a)(6) is printed in the school's admission policy. *TEC, §12.111(6) requires that a charter school's admission policy include a statement that the school will not discriminate in admissions based on gender, national origin, ethnicity, religion, disability, academic, artistic, or athletic ability, or the district the child would otherwise attend.*

Check One: Yes

No

J. Does the admission policy either require or permit the school to exclude from admission all students with documented histories of a criminal offense, a juvenile court adjudication, or discipline problems under TEC Chapter 37, Subchapter A as authorized by TEC, § 12.111(a)(6)?

Check One: Yes (The school excludes such students or reserves the right to exclude such students from admissions.)

No (The school does not deny admission to such students based on their documented histories of misconduct.)

Submit

- as **Attachment 3**, a current copy of the admission policy that incorporates the information provided in the above answers to questions A through H and any other relevant information;
- as **Attachment 4**, a blank copy of the current admission application (i.e., the information requested when the student first seeks admission); and
- as **Attachment 5**, a blank copy of the current enrollment form(s) (i.e., the information required once an applicant has been offered admission and is registering for enrollment)



Dallas County Community College District



Brookhaven College
3939 Valley View Lane
Farmers Branch, TX 75244-4997
972-860-4883



Cedar Valley College
3030 North Dallas Avenue
Lancaster, TX 75134-3799
972-860-8201



Eastfield College
3737 Motley Drive
Mesquite, TX 75150-2099
972-860-7167



El Centro College/BPI
801 Main Street
Dallas, TX 75202-3604
214-860-2000



Mountain View College
4849 W. Illinois Avenue
Dallas, TX 75211
214-860-8600



North Lake College
5001 N. MacArthur Blvd.
Irving, TX 75038-3899
972-273-3183



Richland College
12800 Abrams Road
Dallas, TX 75243-2199
972-238-6100



Dallas TeleCollege
9596 Walnut Street
Dallas, TX 75243
972-669-6400

Application for Admission

Educational opportunities are offered by the Dallas County Community College District (DCCCD) without regard to race, color, age, national origin, religion, sex, disability or sexual orientation.



Student Information Profile

Dallas County Community College District

Please print legibly the exact same spelling of your name as you provided on your application.

Name: (Last Name)	(First Name)	(Middle Initial)

Please carefully answer the questions below. The purpose of these questions is to: (1) determine if you may have a need for campus services or special assistance to increase your success in college and (2) provide you with current information about college resources and events. **Your responses in no way affect your admission or enrollment into the Dallas County Community Colleges.**



Student ID#							
0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9

or

Social Security Number									
-		-		-		-		-	
0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9

1. Reason for attending: (Mark All That Apply)

- | | |
|--|---|
| <input type="checkbox"/> Personal Interest | <input type="checkbox"/> Earn a certificate |
| <input type="checkbox"/> Earn an Associate Degree | <input type="checkbox"/> Transfer for a Bachelor's Degree |
| <input type="checkbox"/> Enroll in Continuing Education courses | <input type="checkbox"/> Enroll in job related courses |
| <input type="checkbox"/> Complete prerequisites for a program at another college | <input type="checkbox"/> Improve GPA |
| <input type="checkbox"/> Complete core curriculum or field of study | <input type="checkbox"/> Uncertain |

2. My major area of interest or study is: (Mark Only One)

- | | | |
|---|--|---|
| <input type="checkbox"/> Business | <input type="checkbox"/> Computers | <input type="checkbox"/> Personal Interest |
| <input type="checkbox"/> Education | <input type="checkbox"/> Engineering/Math | <input type="checkbox"/> Health/Medical |
| <input type="checkbox"/> Liberal Arts/Fine Arts | <input type="checkbox"/> Social Services | <input type="checkbox"/> Non-Degree Seeking |
| <input type="checkbox"/> Science | <input type="checkbox"/> Undecided | <input type="checkbox"/> Job Skills |
| <input type="checkbox"/> Languages | <input type="checkbox"/> Technology (Non-computer) | <input type="checkbox"/> Other |

3. Is English your primary language?

- Yes No

4. I have a disability or medical condition: (Mark All That Apply)

- None Learning Mental Physical

5. How many family members other than yourself are living in your household? (Mark Only One)

- Zero One Two Three Four
 Five Six Seven Eight or more

6. Please indicate the total annual family taxable income: (Mark Only One)

- | | | |
|--|--|---|
| <input type="checkbox"/> Less than \$14,355 | <input type="checkbox"/> \$24,136 - \$29,025 | <input type="checkbox"/> \$38,806 - \$43,695 |
| <input type="checkbox"/> \$14,356 - \$19,245 | <input type="checkbox"/> \$29,026 - \$33,915 | <input type="checkbox"/> \$43,696 - \$48,585 |
| <input type="checkbox"/> \$19,246 - \$24,135 | <input type="checkbox"/> \$33,916 - \$38,805 | <input type="checkbox"/> \$48,586 - or higher |

7. Employment Status while I am taking classes: (Mark Only One)

- I am unemployed and not seeking employment
- I am unemployed/laid off and seeking employment
- I will be employed outside the home 1 to 20 hours per week
- I will be employed outside the home 21 to 34 hours per week
- I will be employed outside the home 35 or more hours per week

8. My family status is: (Mark All That Apply)

- A single parent with custody of a dependent child
- A single parent with non-custodial care for a dependent child but paying child support
- A homemaker primarily working at home
- Divorced, separated or widowed, having lost the income of a spouse
- None of the above

9. Parents' Highest Level of Education:

Mother (Mark Only One)

- Earned a bachelor's degree or higher
- Earned a certificate or associate degree
- Attended College
- Graduated from High School
- Attended High School
- Do not know

Father (Mark Only One)

- Earned a bachelor's degree or higher
- Earned a certificate or associate degree
- Attended College
- Graduated from High School
- Attended High School
- Do not know

**10. Please indicate all activities/programs/topics in which you have interest and would like to receive information:
Some activities/programs are not available at all of the colleges.**

(Mark All That Apply)

- | | |
|--|--|
| <input type="checkbox"/> Academic Advisement | <input type="checkbox"/> International/Study Abroad Programs |
| <input type="checkbox"/> Athletics | <input type="checkbox"/> Library Research Skills |
| <input type="checkbox"/> Band/Orchestra | <input type="checkbox"/> Math Skills |
| <input type="checkbox"/> Career Planning Advisement | <input type="checkbox"/> Reading Skills |
| <input type="checkbox"/> Child Care Information | <input type="checkbox"/> Returning Adult Programs |
| <input type="checkbox"/> Choir | <input type="checkbox"/> Service Learning Opportunities |
| <input type="checkbox"/> College Newspaper | <input type="checkbox"/> Stress Management |
| <input type="checkbox"/> College Special Events | <input type="checkbox"/> Student Health Insurance |
| <input type="checkbox"/> Dance/Drill Team/Cheerleading | <input type="checkbox"/> Student Clubs, Programs/Campus Life |
| <input type="checkbox"/> Disability Services | <input type="checkbox"/> Tutoring |
| <input type="checkbox"/> Distance Learning Courses | <input type="checkbox"/> Volunteer Opportunities |
| <input type="checkbox"/> Drama/Theater | <input type="checkbox"/> Writing Skills |
| <input type="checkbox"/> Employment Assistance | |
| <input type="checkbox"/> Financial Aid | |
| <input type="checkbox"/> Health Services | |
| <input type="checkbox"/> Honors Programs | |
| <input type="checkbox"/> Hot Careers and Programs | |

11. Are you a veteran?

- Yes
- No

INSTRUCTIONS

1. All applicants must complete PART A and PART I.
2. Applicants wishing to claim Texas residence for tuition purposes must complete the following:
 - Students of a Texas public college or university during the past 12 months, who paid resident (in-state) tuition, without a tuition waiver, must complete PART A, B and I.
 - Recent high school graduates must complete PART A, B, C, D and I.
 - Dependents of Texas residents must complete PART A, B, C, D, E, G and I.
 - Applicants who did not attend a Texas public college or university during the past 12 months must complete PART A, B, C, D, E, F and I.
 - PART H is for any additional information an applicant believes the college should know in evaluating Texas residence.
3. Applicants who are not claiming Texas residence for tuition purposes must complete PART A, B, C and I only.

BIOGRAPHICAL INFORMATION

Questions with an asterisk (*) are voluntary, and the information provided will remain confidential. In addition, supplying your social security number, gender, and ethnicity enables a more expedient match of test scores, transcripts, financial aid benefits, and tuition refunds.

APPLICATION METHODS

Applicants may apply one of four ways:

1. An online application process is available for credit students at <http://econnect.dcccd.edu>.
2. Apply Texas Application www.ApplyTexas.org
3. An Adobe PDF version of the application is available at <http://www.dcccd.edu/formspdf/admapp.pdf>
4. Complete this paper application, and submit it to the college of your choice within the DCCCD

Please print in **blue** or **black** ink and complete all appropriate Parts.

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. If you wish to protect your directory information from disclosure, proceed to the following website or contact the Admissions/Registrars Office.

For information see: <http://econnect.dcccd.edu>

Student Name:

DCCCD Student ID Number:



Dallas County
Community College District

SEMESTER YOU PLAN TO ATTEND

- Fall (Aug-Dec)
- Spring (Jan - May)
- Summer I (June)
- Summer II (July)

Application for Admission

Your responses to questions with an asterisk (*) are voluntary.

Part A: Biographical Information

*SOCIAL SECURITY NUMBER		E-Mail Address This is our primary means of communication.	
*GENDER <input type="checkbox"/> M <input type="checkbox"/> F	NAME Give full legal name Do not use initials unless initials are your legal name		
	Last	First	Middle
Give names, if different from above, that are on transcripts from other institutions.		DATE OF BIRTH (MM/DD/YY)	
Current Street Address (must be a physical address)		Apartment #	
City	State	Zip	Do you live in Dallas County? <input type="checkbox"/> YES <input type="checkbox"/> NO
Permanent Mailing Address (can be a PO Box number)			
Home Number (Include Area Code)	Work Number (Include Area Code)	Cell Number (Include Area Code)	

PERSON TO NOTIFY IN THE EVENT OF AN EMERGENCY

Name _____ Phone Number (_____) _____

*** Ethnicity and Racial Background:** (How do you identify yourself?) This information will be used for federal and/or state law reporting purposes only.

Are you Hispanic or Latino? _____ Yes _____ No _____ unknown or I choose not to respond.

Please select the racial category or categories with which you most closely identify. Check as many as apply.

- White (1) Black or African American (2) Asian (4)
- Native American/Alaskan (5) Unknown/No response (7) Native Hawaiian or Pacific Islander (8)

My Primary Language is: _____

Place Of Birth: _____ State: _____ Country: _____

FOR OFFICE USE
Date Received:
Residency Code:
County Code:
How Admitted:
Term:
Citizen:
TSI Status:
Cond. Agreement:
Rising Star:
Tech Prep:
Dual Credit:
Staff:

REASON FOR ATTENDING

I will take courses:

- To Earn a One-Year Certificate (APPN.CERT)
- To Earn a Two-Year Degree (APPN.ASSOCIATE)
- To Improve Job Skills (APPN. J/R)
- To Transfer to a University (APPN.U/T)
- For Personal Interest (APPN.N/D)
- Uncertain (APPN.UNCERTAIN)

Military-Veteran Status

 If you have any military affiliations, please indicate by selecting all that apply:

- Current/Former member of the US Armed Forces
- Current/Former member of the National Guard
- Current/Former member of the Reserves
- Dependent of a veteran
- Dependent of a deceased veteran
- Dependent of a veteran with a combat-related injury

Student Name: _____

DCCCD Student ID Number: _____

1. Are you a U.S. Citizen? YES NO
If "no", of what country are you a citizen? _____
2. If you are not a citizen, do you hold Permanent Resident status (valid I-551) for the U.S.? YES NO
(If "Yes", date permanent resident card issued: ____/____/____.) Enclose a copy of both sides of the card.
(Month) (Day) (Year)
3. If you are not a U.S. citizen or permanent resident, do you have an Application to Register Permanent Residence (form I-485) pending with the U.S. Citizenship and Immigration Services (USCIS)? YES NO
(If "Yes", enclose a copy of your Notice of Action from the USCIS, form I-797C.)
4. If you are not a citizen or permanent resident and have no application pending with the USCIS, have you lived or will you have in Texas for at least 36 consecutive months immediately before graduating from high school or receiving a GED in Texas? YES NO
(If "Yes," please submit a completed "Affidavit of Intent to Become a Permanent Resident".)

Educational Data

Name of High School Attended: _____ City: _____ State: _____
 Graduated/Expected Graduation Date (Month) _____ (Year) _____
 Please answer each question:
 Were you home schooled? Yes No
 Did you take a Tech Prep course or courses for college credit? Yes No
 To determine TEXAS GRANT eligibility, will you graduate from a Texas public high school with the Recommended or Distinguished Achievement Program? Yes No
 Did or will you graduate with an IB diploma? Yes No
 If you did not graduate from high school do you have a GED? Yes No
 If yes, completion date (Month) _____ (Year) _____ which version: English Spanish
 In what state did you receive your GED? _____

Official transcripts for ALL previous college work (except DCCCD colleges) **MUST** be submitted. Failure to list all institutions will be considered an intentional omission and may result in the denial of future enrollment.

List ALL Colleges attended including DCCCD. Attach separate sheet, if necessary.

Name and Location (City and State) (most recent first)	Dates attended		Hours Credits	Degree Cert. Received (if any)	Currently on Suspension Yes / No
	FROM (Month/Year)	TO (Month/Year)			
1.					
2.					
3.					
4.					
5.					

Texas Success Initiative (TSI)

An institution of higher education shall assess the academic skills of each entering undergraduate student to determine the student's readiness to enroll in Freshman-level academic coursework. Some students may be exempt from meeting the requirement of the TSI; however, students will be required to meet college course prerequisite requirements. Please read the following and check the appropriate box that applies to you:

- I have taken: ACCUPLACER ASSET COMPASS THEA TASP MAPS
 SAT ACT TAKS
 I have not taken one of the tests listed above. I understand that I may have to take a test prior to registration.

Exemptions:

1. I am eligible for exemption from additional TSI assessment.
2. I claim an exemption because I am serving on active duty as a member of the U.S. armed forces, the Texas National Guard, or as a member of a reserve component of the U.S. armed forces and have been serving for at least 3 years preceding enrollment. Official documentation must be provided to prove exemptions.
3. I claim an exemption because I was honorably discharged, retired, or released from active duty as a member of the U.S. armed forces, the Texas National Guard, or service as a member of a reserve component of the U.S. armed forces on or after August 1, 1990. Official documentation must be provided to prove exemptions.

Texas Higher Education Coordinating Board rule 21.731 requires each student applying to enroll at an institution to respond to a set of core residency questions for the purpose of determining the student's eligibility for classification as a resident.

Part B: Previous Enrollment

1. During the 12 months prior to the term for which you are applying, did you attend a public college or university in Texas in a fall or spring term?

YES NO

*If you answered "no", continue on to **PART C – RESIDENCY CLAIM**.*

If you answered "yes", complete questions 2 thru 5.

2. What Texas public institution did you last attend? (Give full name, not just initials.)

3. In which term were you last enrolled? Fall, 20 ____ Spring, 20 ____

4. During your last semester at a Texas public institution, did you pay resident (in-state) or nonresident (out-of-state) tuition?

resident (in-state) nonresident (out-of-state) unknown

5. If you paid in-state tuition at your last Texas public institution, was it because you were a Texas resident or because you were a nonresident who received a waiver?

resident nonresident with a waiver unknown

IMPORTANT: If you were enrolled at a Texas public institution during a fall or spring semester within the previous 12 months and were classified as a Texas resident,

***SKIP TO PART I – CERTIFICATION OF INFORMATION,
SIGN AND DATE THIS APPLICATION AND SUBMIT.***

***If you were not enrolled, or if you were enrolled but classified as a nonresident, proceed to
PART C – RESIDENCY CLAIM.***

Part C: Residency Claim

1. Are you a resident of Texas? YES NO

*If you answered "yes", continue to **PART D – ACQUISITION OF HIGH SCHOOL DIPLOMA OR GED**.*

If you answered "no", complete the following question:

Of what state or country are you a resident? _____

*Continue to **PART I – CERTIFICATION OF INFORMATION**.*

*If you are uncertain, continue to **PART D – ACQUISITION OF HIGH SCHOOL DIPLOMA OR GED**.*

Part D: Acquisition of High School Diploma or GED

	Yes	No
<p>1. Did you live in Texas or will you have lived in Texas the 36 consecutive months leading up to high school graduation or completion of the GED?</p> <p><i>(To answer "Yes" you must have graduated from a Texas public or private high school or earn or plan to earn a GED. All others, including home-schooled students who do not plan to earn a GED, must answer "No".)</i></p>		
<p>2. When you begin the semester for which you are applying, will you have lived in Texas for the previous 12 consecutive months?</p>		

Instructions for Part D:

If you answered "no" to question 1 or 2, go to **PART E – BASIS OF CLAIM TO RESIDENCY.**

If you are a U.S. citizen or permanent resident and you answered "yes" to questions 1 and 2, go to **PART I – CERTIFICATION OF INFORMATION.**

If you did not graduate from a Texas high school, continue to **PART E – BASIS OF CLAIM TO RESIDENCY.**

Part E: Basis of Claim to Residency

TO BE COMPLETED BY EVERYONE WHO ANSWERED "NO" TO QUESTIONS 1 or 2 OF PART D or WHO DID NOT GRADUATE FROM A TEXAS HIGH SCHOOL.

- Do you file your own federal income tax as an independent tax payer? YES NO
- Are you claimed as a dependent or are you eligible to be claimed as a dependent by a parent or court-appointed legal guardian? YES NO

(To be eligible to be claimed as a dependent, your parent or legal guardian must provide more than one-half of your support. A step-parent does not qualify as a parent if he/she has not adopted the student.)

- If you answered "No" to both questions above, who provides the majority of your support?
 - Self
 - Parent or Guardian
 - Other: (list) _____

Instructions for Part E:

If you answered "yes" to question 1, go to **PART F.**

If you answered "yes" to question 2, go to **PART G.**

If you answered "no" to 1 and 2 and "self" to question 3, go to **PART F.**

If you answered "no" to 1 and 2 and "parent or guardian" to question 3, go to **PART G.**

If you answered "no" to 1 and 2 and "other" to question 3, go to **PART H,** provide an explanation and complete **PART I.**

Part F: Questions for students who answered "Yes" to Question 1 or "Self" to Question 3 of Part E

	Yes	No	Years	Months	Visa/Status
1. Are you a foreign national whose application for Permanent Resident Status has been preliminarily reviewed? <i>(You should have received a fee/filing receipt or Notice of Action [I-797C] from USCIS showing your I-485 has been reviewed and has not been rejected.)</i>					
2. Are you a foreign national here with a visa or are you a Refugee, Asylee, Parolee, or here under Temporary Protective Status? If so, indicate which. _____					Visa/Status →
3. Do you currently live in Texas? If you are out of state due to a temporary assignment by your employer or other temporary purpose, please explain in PART H .					
4a. If you currently live in Texas, how long have you been living here? _____			Years	Months	
b. What is your main purpose for being in the state? If for reasons other than those listed, give an explanation in PART H .	<input type="checkbox"/> Attend College <input type="checkbox"/> Work Assignment <input type="checkbox"/> Establish and Maintain a Home				
5. If you are a member of the U.S. military, is Texas your Home of Record? _____	Yes	No			
What state is listed as your military legal residence for tax purposes on your Leave and Earnings Statement?	STATE				
6. Do any of the following apply to you: (Check all that apply.)	Yes	No			
a. Hold title to real property (home, land) in Texas? If yes, date acquired: _____					
b. Own a business in Texas? If yes, date acquired: _____					
c. Hold a state or local license to conduct a business or practice a profession in Texas? If yes, date acquired: _____					
7. While living in Texas, have you: (Check all that apply.)					
a. Been gainfully employed for at least a consecutive 12-month period? _____					
b. Received services from a social service agency that provides services to homeless persons for at least a consecutive 12-month period? _____					
8. a. Are you married to a person who could answer "yes" to any part of questions 6 or 7? _____					
b. If "yes", indicate which question could be answered "yes" by your spouse. Question: _____					
c. How long have you been married to the Texas resident? _____					
	Yes	No	Years	Months	

IF YOU COMPLETED PART F, SKIP PART G and CONTINUE TO PART H.

Student Name:

DCCCD Student ID Number:

Part G: Questions for students who answered "Parent" or "Legal Guardian" to Question 3 of Part E

	Yes	No	Years	Months	Visa/Status
1. Is the parent or legal guardian upon whom you base your claim of residency a U.S. citizen?					
2. Is the parent or legal guardian upon whom you base your claim of residency a Permanent Resident?					
3. Is this parent or legal guardian a foreign national whose application for Permanent Resident Status has been preliminarily reviewed? <i>(He or she should have received a fee/filing receipt or Notice of Action [I-797C] from the USCIS showing his or her I-485 has been reviewed and has not been rejected.)</i>					
4. Is this parent or legal guardian a foreign national here with a visa or is a Refugee, Asylee, Parolee, or here under Temporary Protective Status? If so, indicate which. _____					Visa/Status ->
5. Does this parent or legal guardian currently live in Texas? If he or she is out of state due to a temporary assignment by his/her employer or other temporary purpose, please explain in PART H .					
6a. If he or she is currently living in Texas, how long has he or she been living here?			Years	Months	
b. What is your parent's or legal guardian's main purpose for being in the state? If for reasons other than those listed, give an explanation in PART H .	<input type="checkbox"/> Attend College <input type="checkbox"/> Work Assignment <input type="checkbox"/> Establish and Maintain a Home				
7. If he or she is a member of the U. S. military, is Texas his/her Home of Record? What state is listed as his/her military legal residence for tax purposes on his or her Leave and Earnings Statement?	Yes	No			
	STATE				
8. Do any of the following apply to your parent or guardian: (Check all that apply.)	Yes	No			
a. Hold title to real property (home, land) in Texas? If yes, date acquired: _____					
b. Own a business in Texas? If yes, date acquired: _____					
c. Hold a state or local license to conduct a business or practice a profession in Texas? If yes, date acquired: _____					
9. While living in Texas, has your parent or guardian: (Check all that apply.)					
a. Been gainfully employed for at least a consecutive 12-month period?					
b. Received services from a social service agency that provides services to homeless persons for at least a consecutive 12-month period?					
10 a. Is your parent or legal guardian married to a person who could answer "yes" to any part of question 8 or 9?					
b. If "yes", indicate which question could be answered "yes" by your parent's or guardian's spouse. Question: _____					
c. How long has your parent or guardian been married to the Texas resident?					
	Yes	No	Years	Months	

Student Name:

DCCCD Student ID Number:

Part H: General Comments

Is there any additional information that you believe your college should know in evaluating your eligibility to be classified as a resident? If so, please provide it below.

Part I: Certification of Information

All students must complete this section.

I understand that officials of my college/university will use the information submitted on this form to determine my status for residency eligibility. I authorize the college/university to verify the information I have provided, including my Texas Success Initiative (TSI) test scores and residency information as necessary. I agree to notify the proper officials of the institution of any changes in the information provided. I certify that the information in this application is complete and correct, and I understand that the submission of false information is grounds for rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment, or appropriate disciplinary action.

I understand that, by enrolling, I have received or will receive information about bacterial meningitis from the Dallas County Community College District as required by Section 51.9191 of the Texas Education Code.

Signature: _____

Date: _____

The Admissions/Registrars Office reserves the right to request additional information in order to comply with state residency requirements prior to enrollment.

Students found to have been incorrectly classified as a resident for tuition purposes due to information/documentation submitted must begin to pay the nonresident rate immediately and have a maximum of 30 days to repay all previous terms.

**DOCUMENTS SUBMITTED TO MEET ADMISSIONS AND RESIDENCY REQUIREMENTS
BECOME THE PROPERTY OF THE COLLEGE.**

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. If you wish to protect your directory information from disclosure, proceed to the following website or contact the Admissions/Registrars Office.

For information see: <http://econnect.dccd.edu>

Educational opportunities are offered by the Dallas County Community College District (DCCCD) without regard to race, color, age, national origin, religion, sex, disability or sexual orientation.

DCCCD Home Page URL: <http://www.dccd.edu>

E-MAIL

How is my e-mail address used? E-mail is DCCCD's choice means of communication with students. E-mail addresses, personal or district-provided, are used by DCCCD to notify students of official pertinent information and information for activities in which the student has expressed interest. In addition, all students are required to have an e-mail address on file at the Admissions/Registrars office in order to utilize personalized online services (eConnect) that require a login and to activate their online account. Having an e-mail address on record allows students to use personalized services, such as registration, retrieval of grades and financial aid disbursement information, reset password and receive confirmation of the change via e-mail, and so forth. If students wish to use eConnect, a valid e-mail address must be on file at the Admissions/Registrars Office.

What if I don't want to use my personal e-mail address? The DCCCD provides currently enrolled students the ability to request a DCCCD e-mail address (NETMAIL) free of charge. Students may request a NETMAIL e-mail address online at <http://www.dccd.edu/netmail/> or contact a DCCCD College for more information.

Will my e-mail address be released or sold to a third party? E-mail addresses on file in the Admissions/Registrars Office are considered part of directory information and may be requested by outside sources under the Public Information Act, but are not sold to outside sources for profit.

REGISTRATION

How can I register for credit classes? New-to-college students must see an advisor before registering for credit classes. Students who have attended college before, who meet eConnect registration eligibility criteria, and who have a valid e-mail address on file at the Admissions/Registrars Office, may register online at <http://econnect.dccd.edu>. *All other students may register through the Counseling/Advising office at a DCCCD College.*

PROTECTION OF INFORMATION

Dallas County Community College District's (DCCCD) Privacy Commitment is based on two simple ideas. We promise to:

- Comply with all the applicable local, state and federal laws and regulations
- Protect your privacy while still offering relevant, personalized service

Students may request that their directory information, including e-mail address, be protected to prevent the release of information to outside sources by submitting a request online at <http://econnect.dccd.edu> or by contacting a DCCCD College for a request form.

eConnect has carefully combined the very best security software and systems at every level to ensure that the information entrusted to us is not intercepted or abused. Industry standard technologies like SSL (Secure Socket Layers) are used to protect credit card numbers, e-mail addresses and zip codes so they cannot be read as they travel over the Internet.



Brookhaven College
3939 Valley View Lane
Farmers Branch, TX 75244-4997
972-860-4883



Cedar Valley College
3030 North Dallas Avenue
Lancaster, TX 75134-3799
972-860-8201



Eastfield College
3737 Motley Drive
Mesquite, TX 75150-2099
972-860-7167



El Centro College/BPI
801 Main Street
Dallas, TX 75202-3604
214-860-2000



Mountain View College
4849 W. Illinois Avenue
Dallas, TX 75211
214-860-8600



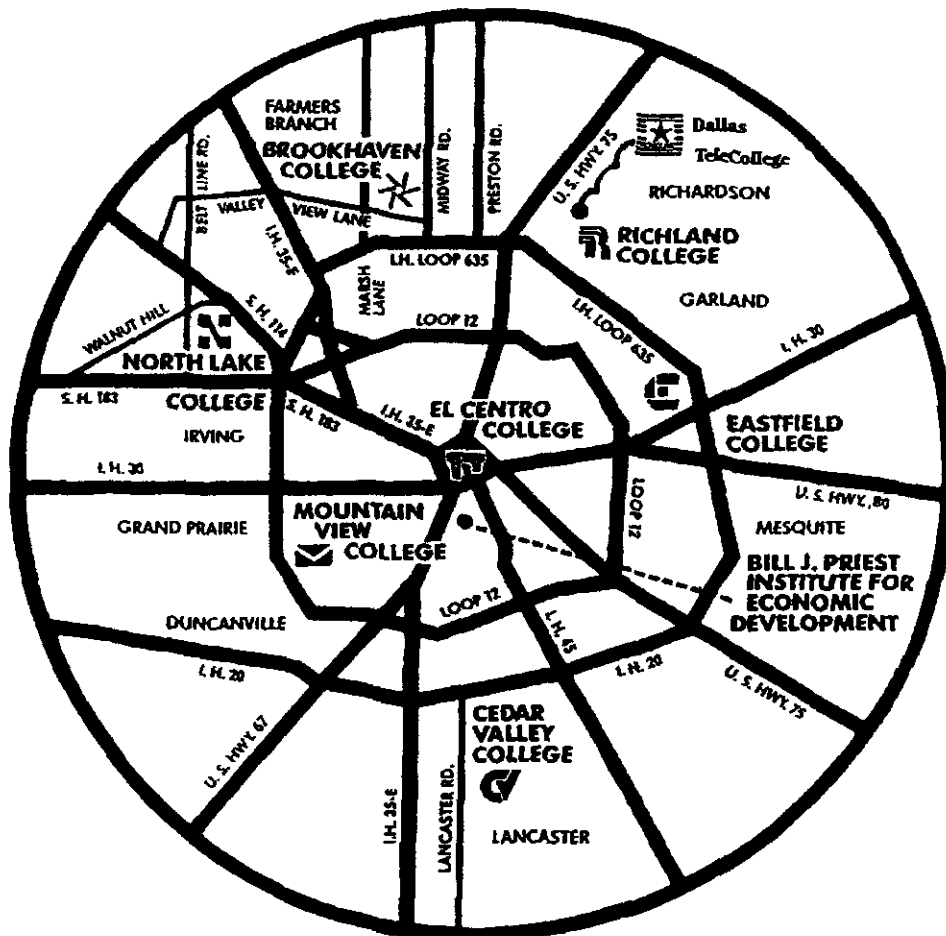
North Lake College
5001 N. MacArthur Blvd.
Irving, TX 75038-3899
972-273-3183



Richland College
12800 Abrams Road
Dallas, TX 75243-2199
972-238-6100



Dallas TeleCollege
9596 Walnut Street
Dallas, TX 75243
972-669-6400



Section IV Attachment 5

RICHLAND COLLEGIATE HIGH SCHOOL
ENROLLMENT FORM

Please complete and/or update the following information, sign and date the completed form and return the form to your child's school.

STUDENT INFORMATION

Student (ID): Student's Name: Last First Middle

Student's Current Address: City: State: Zip:

Home Phone #: (1) Student's Cell #: (2)

Student's E-mail Address:

Current Grade: Date of Birth: Place of Birth: City State County/Country Zip

Student's Social Security #:

Gender (circle one): FEMALE MALE

Ethnicity (circle or list one):

African American Caucasian Hispanic
Asian-American Native American or, preferred choice:

Where did you attend school last year?

What is your assigned public neighborhood school and district?

(Home Campus) (Home District)

What is your first language?

What language does your child speak most of the time?

What is the primary language spoken at home?

Has your child participated in any of the following programs? (Check all that apply)

- Bilingual/ESL Program 504 Program
Special Education Program Gifted and Talented Program

I received "Child Find" information from RCHS.
Please Initial

Parent Signature:

PARENT/GUARDIAN INFORMATION

Father/Male Guardian: _____ Relation to Student: _____ Resides with Student? Yes No

Employer: _____ Occupation: _____ Father's E-mail address: _____

Daytime #:(1) _____ Father's Work #:(2) _____ Father's Cell #:(3) _____

Mother/Female Guardian: _____ Relation to Student: _____ Resides with Student? Yes No

Employer: _____ Occupation: _____ Mother's E-mail address: _____

Daytime #:(1) _____ Mother's Work #:(2) _____ Mother's Cell #:(3) _____

EMERGENCY INFORMATION: (Permission must be given each school year.)

In the event that your child is injured or ill, do RCHS personnel have your permission to administer first aid? Yes No

In the event that RCHS's efforts to contact you have failed and your child is seriously ill or seriously injured, do RCHS personnel have your permission to give consent for a doctor to administer treatment to your child? Yes No

***If either of the above answers is NO, attach specific instructions to this form.**

Family Doctor: _____ Doctor's Phone Number: _____

Emergency contacts to be used if parents/guardian cannot be contacted:

First Choice: _____ Second Choice: _____

Relationship to Student: _____ Relationship to Student: _____

Phone #: (1) _____ (2) _____ Phone #: (1) _____ (2) _____

Disclosure of Student Information:

Certain information about students is considered directory information and will be released to anyone who follows the procedures for requesting the information unless the parent or guardian has given the District written objection to the directory information. Federal law requires release of directory information to military recruiters or institutions of higher education unless the parent specifies an objection to disclosure.

RCHS has designated the following as directory information: The student's name, address, telephone listing, date and place of birth, grade level, photograph, major field of study, participation in officially recognized activities, dates of attendance, degrees and awards received, and the most recent previous educational institution attended by the student.

Permission to publish information internally for school programs such as yearbook or student directory, etc.: Yes No

Permission to release information to military recruiters: Yes No

Permission to release information to an outside individual or group: Yes No

Permission to release information to higher education institutions: Yes No

Signature of Parent/Guardian: _____ Date: _____

Section VI. Assurances Regarding Charter Schools Serving Students at Residential Facilities

If operating a charter school campus on the site of a residential facility (RF) or serving students residing in or receiving services from an RF, the charter holder certifies the following:

Compliance with Special Education Requirements: The charter holder assures that it will comply with all of the requirements for the provision of educational services to students with disabilities as mandated by the Individuals with Disabilities Education Act, as amended, the Texas Education Code, and federal and state special education regulations. The charter holder acknowledges that state and federal special education requirements require, among other things, that it provide a free and appropriate public education (FAPE) in the least restrictive environment (LRE) to students with disabilities residing in RFs. The charter holder further assures that it will provide, or seek the provision of, a FAPE to students with disabilities, which may require it to contract with outside service providers or another local educational agency to provide necessary services and supports to students with disabilities.

Geographic Boundaries: The charter holder assures that it will accept students who reside in the school district(s) that are within each new campus's geographic boundaries regardless of the presence or absence of a disability or admission to or participation in an RF program.

Admissions Criteria: The charter holder assures that its admissions criteria will not be based on the presence or the absence of a disability or on gender, national origin, ethnicity, religion, academic, artistic or athletic ability, or the district the child would otherwise attend.

School Choice: The charter holder assures that parents/legal guardians (or adult students) will be advised that they may choose to enroll their child in either the charter school or the local public school district and that the elected choice will be documented in writing and filed for purposes of review or audit by the Texas Education Agency (TEA), external auditor, or other entity.

Residential Facilities Monitoring (RFM) System: The charter holder assures that it understands that the TEA was required under the *Angel G. v. TEA* consent decree to develop a separate system for monitoring school districts and charter schools that serve students with disabilities who reside in RFs. The charter holder further assures that it understands that it will be required to begin reporting data related to students with disabilities residing in RFs in TEA's data collection system known as *RF Tracker* and that it may be subject to RFM onsite visits based upon a review of the data it reports or on random selection. Finally, the charter holder assures that it understands that the above-referenced consent decree and the RFM System require that certain sanctions be imposed against a school district or charter school that has failed to timely correct noncompliance identified during an onsite visit.

Training: The charter holder assures that all personnel involved with serving students with disabilities residing in an RF and personnel involved with reporting data in *RF Tracker* will receive training on the RFM system.

**Section VI. (Continued) Assurances Regarding Charter Schools Serving
Students at Residential Facilities**

The charter holder assures that this assurance document has been shared with, and understood by, the RF board and that the RF board has acknowledged its understanding of all federal laws and regulations, Texas laws, State Board of Education (SBOE) and commissioner rules related to charter schools serving students at residential facilities and further certifies that any future amendments to the laws, regulations, and rules will be incorporated and implemented.

----- N/A -----	----- ----- -----
Signature of Charter Holder Board Chair <i>(Must sign in blue ink)</i>	Date
----- Printed Name of Charter Holder Board Chair	

If the charter school is not currently approved to serve students at residential facilities, please indicate N/A on the signature line.

Section VII. Bilingual/ESL, Section 504, and Dyslexia Assurances

TEC, Chapter 29, Subchapter B, TEC §12.104(b)(2)(G), and 19 TAC §§89.1201-.1265 require charter schools to identify limited English proficient students based on state criteria and to provide an appropriate bilingual education or English as a second language program conducted by teachers certified for such courses.

- A. The charter holder certifies that it has policies and procedures in place that ensure that it complies with the legal and regulatory requirements concerning identifying and providing appropriate educational services to limited English proficient students. Yes
Check One: No

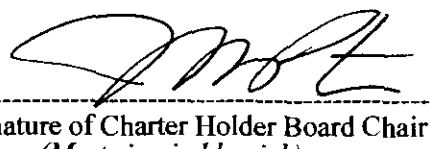
Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. §794, prohibits discrimination on the basis of disability in any program receiving federal financial assistance. A recipient that operates a public education program or activity shall provide a free, appropriate public education to qualified individuals.

- B. The charter holder certifies that it has policies and procedures in place that ensure that it complies with the legal and regulatory requirements concerning identifying and providing appropriate educational services to students protected by Section 504. Yes
Check One: No

TEC §38.003, TEC §12.104(b)(2)(K), 19 TAC §74.28 and Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. §794, require charter schools to identify students with dyslexia or related disorders and to provide appropriate educational services.

- C. The charter holder certifies that it has policies and procedures in place that ensure that it complies with the legal and regulatory requirements concerning identifying and providing appropriate educational services to students with dyslexia or related disorders. Yes
Check One: No

I further certify that any future amendments to the laws, regulations, and rules will be incorporated and implemented.



Signature of Charter Holder Board Chair
(Must sign in blue ink)

4/6/2010

Date

Jerry Prater

Printed Name of Charter Holder Board Chair

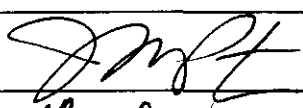

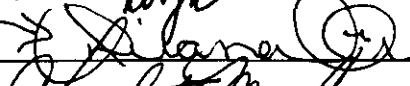

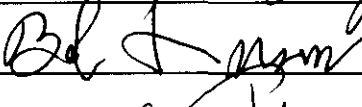
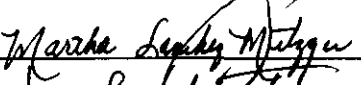
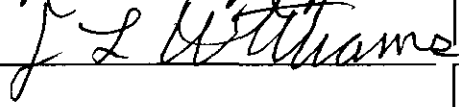
Section VIII. Certificate of Acknowledgement

This section requires at least a majority of the governing body of the charter holder to certify that it has had an opportunity to review the completed renewal application and has authorized, during an open meeting, submission of the application to the commissioner of education for consideration of renewal of the charter.

CERTIFICATE OF ACKNOWLEDGEMENT

The undersigned members of the governing body of the charter holder hereby acknowledge that they have had an opportunity to review the completed renewal application and have authorized its submission, during an open meeting, to the commissioner of education for consideration of the renewal of the charter:

**Members are to sign the acknowledgement during an open meeting; therefore, the date next to each signature should be the same.*

Typed Name (Type name next to corresponding signature)	Signature (Must sign in blue ink)	Date*
Jerry Prater		4/6/10
Diana Flores		4/6/10
Kitty Boyle		4-6-10
Charletta Compton		4-6-10
Bob Ferguson		4/6/10
Martha Sanchez Metzger		4-6-10
JL Sonny Williams		4-14-10

CHARTER SCHOOLS
RECEIVED

RESOLUTION
OF THE BOARD OF TRUSTEES
OF THE RICHLAND COLLEGIATE HIGH SCHOOL
OF MATHEMATICS, SCIENCE, AND ENGINEERING

2010 APR 27 PM 12:04
TEXAS EDUCATION AGENCY

WHEREAS, the Richland Collegiate High School of Mathematics, Science and Engineering charter expires on July 31, 2010;



WHEREAS, the Texas Education Agency (TEA) requires a charter renewal application prior to expiration of the charter; NOW THEREFORE


BE IT RESOLVED BY THE BOARD OF TRUSTEES OF THE RICHLAND COLLEGIATE HIGH SCHOOL OF MATHEMATICS, SCIENCE, AND ENGINEERING:


Section 1. That the Interim Superintendent of Richland Collegiate High School of Mathematics, Science, and Engineering is authorized to submit the Spring 2010 Open-Enrollment Charter Renewal Application to TEA.

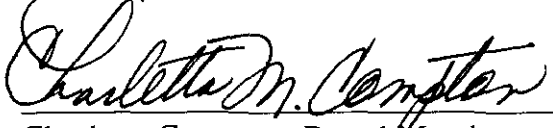
Section 2. That this Resolution takes effect upon approval by the Board of Trustees.

DALLAS COUNTY COMMUNITY COLLEGE DISTRICT
Board of Trustees

By:  
Jerry Prater, Chairman

By: 
Diana Flores, Vice Chair

By: 
Kitty Boyle, Board Member

By: 
Charletta Compton, Board Member

By: Bob Ferguson
Bob Ferguson, Board Member

CHARTER SCHOOLS
RECEIVED

2010 APR 27 PM 12:04

By: Martha Sanchez Metzger
Martha Sanchez Metzger, Board Member

TEXAS EDUCATION AGENCY

By: L. Sonny Williams
L. Sonny Williams, Board Member

ATTEST

By: Wright L. Lassiter, Jr.
Wright L. Lassiter, Jr., Secretary
Board of Trustees

Adopted: April 6, 2010



TEXAS EDUCATION AGENCY

1701 North Congress Ave. • Austin, Texas 78701-1494 • 512 463-9734 • 512 463-9838 FAX • www.tea.state.tx.us

Robert Scott
Commissioner

Charter Renewal Contract

February 28, 2011

Prather
Mr. Jerry M. Prather, Board Chair
Dallas County Community College District
4141 Keele Drive
Garland, Texas 75041

CHARTER SCHOOLS
RECEIVED
2011 APR 19 PM 3:01
TEXAS EDUCATION AGENCY

Re: Charter Renewal Contract for Richland Collegiate High School of Math Science Engineering (CDN 057840)

Dear Mr. Prather:

I am pleased to inform you that the charter renewal is approved for Richland Collegiate High School of Math Science Engineering with a contract ending date of July 31, 2020. After renewal, the charter contract shall consist of the following:

- the representations and assurances made by the charter holder in the original request for application under the standard application system;
- the original contract for charter, as signed by the charter holder and the State Board of Education;
- any condition, amendment, modification, revision, or other change to the charter approved by the State Board of Education or the commissioner of education;
- the final renewal application, on file with the Division of Charter School Administration, including any revisions required by the agency and any amendments to the charter made through the renewal application; and
- all statements, assurances, commitments, and representations made by the charter holder in its application for charter renewal and its attachments or related documents, to the extent that these documents are consistent with those listed above.

Note that this contract is contingent upon legislative authorization and that the contract and the funding under state and federal law may be modified or even terminated by future legislative acts. Furthermore, state and federal laws and rules may periodically be adopted, amended, or repealed, and all such changes applicable to the charter holder or its charter school(s) may modify this contract, as of the effective date provided in the law or rule. Nothing in the charter contract shall be construed to entitle the charter holder to any privilege or benefit, including any funding, but in accordance with state and federal laws in effect and as they may in the future be amended. A contract term that conflicts with any state or federal law or rule is superseded by the law or rule to the extent that the law or rule conflicts with the contract term.

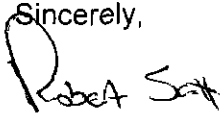
Mr. Jerry M. Prather, Board Chair
Dallas County Community College District
Page 2

To acknowledge acceptance of this renewed contract, the chair of the charter holder board must sign below and return the entire original document to:

Texas Education Agency
Division of Charter School Administration
William B. Travis Building, Room 5-107
1701 North Congress Avenue
Austin, Texas 78701-1494

The charter holder should keep a copy of the document for its files. Please contact the Division of Charter School Administration at (512) 463-9575 with any questions.

Sincerely,



Robert Scott
Commissioner of Education

cc: Ms. Donna R. Walker, Superintendent

RS/rs

CHARTER SCHOOLS
RECEIVED
2011 APR 19 PM 3:01
TEXAS EDUCATION AGENCY

I the undersigned hereby certify that the governing body of the charter holder has accepted and agreed to the charter renewal agreement for Richland Collegiate High School of Math Science Engineering as outlined in the foregoing letter and has authorized me to sign below.

Agreed and Accepted:



Jerry M. Prather ~~PRATHER~~
Board Chair, Dallas County Community College District

4/5/11
Date