

SCHOOL PROFILE SUMMARY REPORT

To be completed by the Principal, confirmed by the Evaluation Chairperson and submitted with the Visiting Committee Report.

SCHOOL IDENTIFICATION:

School Name: _____ School ID: _____

Address: _____

Conference: _____ Union Conference: _____

Principal: _____ E-Mail: _____

School Type: _____ No. of Constituent Churches: _____ Membership: _____

ENROLLMENT DATA: (Current School Year)

Opening Enrollment History and Projected Enrollment Total for ALL Grades					
3 Years Ago	2 Years Ago	1 Year Ago	Current Year	Next Year	In 2 Years

Percentage of Current
Students from Adventist
Homes: _____%

PERSONNEL DATA: (Current School Year)

Number of Total Staff (FTE): Administrative: _____ Certificated Instructional: _____

K-12 School Only: Number of Certificated Instructional (FTE): K-8: _____ 9-12: _____

Number of Staff (Head Count) Part-time: _____ Classified/Support Staff: _____

FINANCIAL DATA: (Last Fiscal Year)

Total Operating Expense (Last Fiscal Year): _____ Actual Increase (Decrease): _____

Total Tuition/Fees Income (as % all income): _____ Operating Expense Per Std: _____

ACCREDITATION DATA:

Date of Prior Full Evaluation Visit: _____ Term Granted: _____

Date of Any Additional Visits: _____ Type of Visit: _____

SIGNATURE:

Completed By: _____ Date: _____