

School Directory Information

Please complete and email to SharonDickerson@txsda.org.

School Name: _____
Physical Address: _____
City: _____ State: _____ Zip: _____
PO Box: _____ City: _____ State: _____ Zip: _____
Phone: _____ FAX: _____
Email: _____
School Day Hours: _____

School Board Chairperson: _____
Address: _____
City, State, Zip: _____
Cell Phone: _____ Email: _____

School Treasurer: _____
Address: _____
City, State, Zip: _____
Cell Phone: _____ Email: _____

Home and School Leader: _____
Address: _____
City, State, Zip: _____
Cell Phone: _____ Email: _____

Month the new school board takes office: _____

School Board Meeting Schedule:
Day of Month: _____ Time: _____

Tuition Rate: Constituent: _____ Non-Constituent: _____

Constituency Church(es):

