## Name of Your Private School <mark>Address</mark> City, State and ZIP

Da	ate

Registered Nonpublic Schools
Office of Portfolio
Louisiana Department of Education
P.O. Box 94064
Baton Rouge, LA 70804
To whom it may concern:
In accordance with LA R.S. 17:236 and LA R.S. 17:232 (C)(D), Your School's Name began classes
on <u>Date you Began Classes</u> , for the 2013-2014 school year for a school term of 180 days. Our total
enrollment is
Very truly yours,
Signature Signat
Printed Name of Head of Household
Principal