

Michigan Public Educational Facilities Authority 2009 State Aid Note Program Application

Issued under authority of Executive Order 2002-3 and Public Act 227 of 1985, as amended.

INSTRUCTIONS: The application documents must be received by the Michigan Public Educational Facilities Authority (MPEFA) on or before **May 15, 2009**. If you have questions regarding this form, contact MPEFA at 517-335-0994.

Name of Academy	Federal Employer Identification Number	School Code
Amount of Borrowing Need *	Academy Web site	

* The borrowing maximum is 70% of the State Aid not already pledged based on the lower of the 2008-2009 or projected 2009-2010 enrollment.

PRIMARY CONTACT INFORMATION		
Name and Title	Telephone Number	
Address		
E-mail Address	Cellular Phone Number (optional)	Fax Number
SECONDARY CONTACT INFORMATION		
Name and Title	Telephone Number	
Address		
E-mail Address	Cellular Phone Number (optional)	Fax Number
AUTHORIZER		
Authorizing Body	Contact Person	
Address		
E-mail Address	Telephone Number	Fax Number
ACADEMY (LOCAL) COUNSEL (Bond Buyer's Municipal Marketplace Directory recognized)		
Firm	Contact Person	
Address		
E-mail Address	Telephone Number	Fax Number
MANAGEMENT COMPANY (if applicable)		
Firm	Management Company Contract Expiration Date	
Contact Name and Title	Telephone Number	
Address		
E-mail Address	Cellular Phone Number (optional)	Fax Number

ACADEMY OPERATING INFORMATION			
1. Total Operating Expenses, Estimated for FY 2008-2009	2. Original Charter Issue Date	3. Next Charter Renewal Date	4. Year Academy Opened
5. 2006-2007 Enrollment	6. 2007-2008 Enrollment	7. 2008-2009 Enrollment	
8. 2009-2010 Estimated Enrollment	9. 2009-2010 Waiting List	10. Student/Teacher Ratio	
<input type="checkbox"/> Yes <input type="checkbox"/> No 11. Since June 30, 2008, has the Academy borrowed or does the Academy anticipate borrowing any money? If Yes, attach an explanation.			
<input type="checkbox"/> Yes <input type="checkbox"/> No 12. Has the Academy ever defaulted in the payment of any security or debt obligation? If Yes, attach an explanation.			
<input type="checkbox"/> Yes <input type="checkbox"/> No 13. Is there any pending litigation which could have an adverse impact on the financial condition of the Academy? If Yes, attach an explanation.			
<input type="checkbox"/> Yes <input type="checkbox"/> No 14. Does the Academy have a contract with a management company? If Yes, please complete the management company contact section on page 1.			
<input type="checkbox"/> Yes <input type="checkbox"/> No 15. Does the Academy anticipate changing management companies or authorizers? If Yes, attach an explanation.			
<input type="checkbox"/> Yes <input type="checkbox"/> No 16. Is the Academy interested in participating in the tax-exempt SAN program? A Yes response is not a commitment to participate in the tax-exempt SAN.)			
<input type="checkbox"/> Yes <input type="checkbox"/> No 17. Does the Academy lease its facility? If Yes, when does the lease expire? _____			
<input type="checkbox"/> Yes <input type="checkbox"/> No 18. Does the Academy have any outstanding long term debt? If Yes, attach copies of State Aid Agreement(s).			
CERTIFICATION			
<p><i>I, the undersigned, certify that this application and the attachments were authorized by the governing body of the Academy, are complete and accurate in all respects, and do not contain any misleading information. I understand that information provided in this application, including the attachments, may be used in the Authority's Preliminary Official Statement and/or its Official Statement with respect to its Notes, all or part of which proceeds will be used to purchase the note(s) of the Academy, and I hereby consent, on behalf of the Academy, to such use of any such information. I further certify that with respect to all obligations subject to the requirements of Act 451, Public Acts of Michigan, 1976, as amended (the "Act"), or Act 34, Public Acts of Michigan, 2001, the Revised Municipal Finance Act, as amended, the Academy has complied with all such requirements.</i></p>			
Name of Authorized Officer (print or type)		Title	
Signature of Authorized Officer			Date
DOCUMENTS REQUIRED FOR APPLICATION PROCESS			
APPLICATION DOCUMENTS: Required by May 15, 2009: <ul style="list-style-type: none"> • State Aid Note Program Application, Form 4039 (completed with original signature) • Audited financial reports (fiscal years ended June 30, 2006, June 30, 2007 and June 30, 2008) • Current Operating Budget, including all Amendments (2008-2009) • Proposed Operating Budget (2009-2010) • Projected/Current Cash Flow, Form 4046: Monthly Cash Flow (2009-2010), Weekly Cash Flow (2009-2010), and Monthly Cash Flow (2008-2009) • Treasury qualifying letter (fiscal year ended June 30, 2008) or prior approval if not qualified, or proof of application • Educational Service Provider agreement (management contract), if any • Other (as required to complete portions of application) 			
PRECLOSING DOCUMENTS: Required by June 11, 2009: <ul style="list-style-type: none"> • Borrowing resolution (approved by Academy board), form of resolution available on MPEFA Web site: www.michigan.gov/mpefa • Letter from your authorizer stating there is a valid charter contract and there are no outstanding notices to revoke the contract nor requests for termination of the contract. 			
SUBMITTING THIS APPLICATION			
<p>All application documents must be received by MPEFA on or before May 15, 2009. If you choose to submit your completed application and <u>supporting documents</u> by e-mail or fax, you must also mail the original signed application to MPEFA within ten days. A copy of this application should also be submitted to your local counsel. If you have questions regarding this application, contact the MPEFA at 517-335-0994.</p>			
US MAIL: MPEFA Department of Treasury 430 W. Allegan Lansing, MI 48922		OVERNIGHT DELIVERY: MPEFA Department of Treasury Operations Center 7285 Parsons Dr. Dimondale, MI 48821	
E-MAIL: Treas_MPEFA@michigan.gov		HAND DELIVERY: MPEFA Austin Building 430 W. Allegan Lansing, MI 48922	
		FAX: 517-241-9509	