

The Council of Independent Black Institutions



"Dedicated to Excellence"

Founded in 1972

**Application for
Full Institutional Membership**

(Please type or print clearly in black ink!)

Name of Organization: _____

Mailing Address: _____

City: _____ State/Province _____ Zip Code/Postal Code _____

Telephone numbers: Day (____) _____ Evening (____) _____

Fax (____) _____ E-mail: _____

Contact person: _____ Title: _____

Tell us about your organization:

Year organization founded: _____ Is your organization a school? Yes ___ No ___

If no, how would you classify your organization? _____

If your organization is not a school, does it operate a school? Yes ___ No ___

If yes, what is the school's name? _____

What are the sources of funding for the organization's or school's operating budget and what percentage of the budget does each general term (e.g., tuition, fundraising, business income, government allocations, grants, etc.) represent?

1. _____ (____%) 2. _____ (____%)

3. _____ (____%) 4. _____ (____%)

5. _____ (____%) 6. _____ (____%)

School Profile:

Year school founded: _____ Basic tuition rate per full-time student per year: \$ _____

Current student enrollment: Full-time: _____ Part-time: _____ Total: _____

Age ranges: Full-time students: _____ to _____ Part-time students: _____ to _____

Grade level ranges: Full-time students: _____ to _____ Part-time students: _____ to _____

How many teachers? Full-time (paid) _____ Part-time (paid) _____ Volunteer _____

ABOUT CIBI'S INSTITUTIONAL MEMBERSHIP POLICY

CIBI membership is open to organizations, individuals, and families who are committed to providing or supporting independent Afrikan-centered education. There are four corresponding types of CIBI membership: (a) Full, (b) Part-Time, (c) Individual, and (d) Family. Organizations participate in CIBI within one or two categories of institutional membership: "Full" or "Part-Time." Full Institutional membership is not to be confused with accreditation by CIBI. Accreditation, as envisioned within CIBI, will require Full Institutional membership status and a site visit by a CIBI accrediting team. Our goal is for all of CIBI's Full Institutional members to be actively applying our *Standards for Evaluating Afrikan-Centered Educational Institutions* throughout their operations and engaging in an ongoing process of self-evaluation and action planning based upon those standards.

In order to become a **Full Institutional member** of CIBI, an organization must:

- 1) Operate a full-time Afrikan centered educational institution, i.e. a school.
- 2) File an application and complete a self-evaluation using the *CIBI Standards for Evaluating Afrikan-Centered Educational Institutions*. The application is due two months after the membership payment and the self-evaluation is due one year after that payment.

In order to maintain **Full Institutional membership** status within CIBI, an organization must:

- 1) Operate a full-time Afrikan centered educational institution, i.e. a school.
- 2) If accepted for institutional membership prior to the 1997-98 CIBI fiscal year, complete a self-evaluation using the *CIBI Standards for Evaluating Afrikan-Centered Educational Institutions* and subsequently file with the Ndundu a satisfactory report and action plan based on the self-evaluation within the three-year period that begins with the 1997-98 CIBI fiscal year and ends with the 1999-2000 CIBI fiscal year.
- 3) Complete a self-evaluation using the *CIBI Standards for Evaluating Afrikan-Centered Educational Institutions* one year of submitting its initial self-evaluation report and action plan and then at five year intervals thereafter.
- 4) Pay annual dues at the Full Institutional member rate of \$65, or \$110 for a two-year and \$140 for a three-year membership, and annually update its membership application.

As an authorized representative of the organization applying for Full Institutional Membership in the Council of Independent Black Institutions (CIBI), I have read and understand the above statement about CIBI membership policy and attest that all information provided in this application is accurate to the best of my knowledge.

Signature

Title

Date

Please submit the following with your application:

- A self-evaluation report, using the *CIBI Standards*, indicating whether each criterion is fully, partially, or not met, as well as supporting documents (e.g., handbooks, brochures).
- \$65 for first year full institutional membership dues or \$110 for a two-year and \$140 for a three-year via check or postal money order payable to **CIBI**, or pay online at www.cibi.org.

Mail the completed application and payment (or pay online) to: CIBI
P.O. Box 331544
Nashville, TN 37203

For assistance, please call: (202) 291-5600 or e-mail us at contact@cibi.org.