

REQUEST TO NAME A SCHOOL OR TO CHANGE THE NAME OF AN EXISTING SCHOOL

PLEASE TYPE OR PRINT LEGIBLY

Region, District, or Program Designation: _____

INSTRUCTIONS: For schools under the jurisdiction of a community school district, please complete and submit this form to the Office of Family Information and Action (OFIA), NYC Department of Education, 49 Chambers Street, Room 503, New York, NY 10007 (fax 212-374-0076). For schools **not** under the jurisdiction of a community school district, please complete and submit this form to the Office of Student Enrollment (OSE), NYC Department of Education, 52 Chambers Street, Room 415, New York, NY 10007 (fax 212-374-5568).

After consultation with the Parent Association or Parent-Teacher Association, we hereby submit a request that _____ be officially named _____.
(school number)

This request is for **one** of the following (check appropriate box):

- A new school located at: _____

- An existing school which had not been named previously.
- The remaining of an existing school. Please complete the following:
(a) What was the prior official name? _____
(b) In what year did the school receive its previous name? _____
- A specialized area in a school such as the playground, fields, or gymnasium.
Identify the area: _____

Please attach the following:

1. If a school is to be named for a deceased person, attach written permission from the next of kin. If a name change request involves a school already named after a deceased person, attach comments received from the next of kin of the name to be replaced. If no comments have been received, attach a statement of the efforts made to contact the next of kin.
2. A brief statement describing how the deceased person whose name is being submitted is identified with the school or the area in which the school is located.
3. For schools under the jurisdiction of the community school district, please: a) include a copy of the minutes indicating the PA's approval and vote; b) indicate the superintendent's recommendation; and c) include a certified copy of community education council minutes reflecting a vote on whether to support the proposed name.
4. For schools not under the jurisdiction of a community school district, please: a) indicate the principal's approval; b) include a copy of the minutes indicating the approval and vote of the PA; and c) indicate the superintendent's recommendation.

Submitted by:

Signature of Principal

Date

Signature of Superintendent

Date

APPROVAL: _____
Director, OSE or OFIA

Date

APPROVAL: _____
(for the) Chancellor

Date