

**Partners in Education Tax Credit Program
Scholarship Granting Organization
Report of Schools with Participation Agreements**

Scholarship Granting Organization: _____

SGO Identification #: _____

Pursuant to SDCL 13-65-4(11) list below all schools entering into participation agreements with the Scholarship Granting Organizations.

	Name of School	Certified Enrollment as of the previous October 15th (available from the South Dakota Department of Education)
1		
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Additional pages may be attached if necessary to present a complete participation agreement list

I certify that I have completed this worksheet on behalf of the above named Scholarship Granting Organization. The information provided is true and correct representations of the organization's activities in the fiscal year identified above.

SGO Representative Signature _____

Date _____