



October 13th, 2021

Members of the Public Education Commission and the Charter Schools Division,

Our team is pleased to submit our Board of Finance Application and supporting documents for consideration at the October Public Education Committee meeting. These documents have all been completed as instructed by the appropriate parties. We are eager to be deemed a Board of Finance as we continue to work throughout our implementation year in anticipation of welcoming students for the 2022-2023 school year.

The following items are attached to this application packet:

1. Signed affidavit from our School Business Manager
2. Signed and notarized affidavits from THRIVE's Governing Board members
3. Signed Statements of consultation from THRIVE's Governing Board members
4. Verification of THRIVE's participation in the New Mexico Public School Insurance Authority

Our Founding Team and Governing Board members thank you for your consideration.

Sincerely,

A handwritten signature in blue ink that reads "Sean Duncan". The signature is fluid and cursive, with the first name "Sean" and last name "Duncan" clearly distinguishable.

Sean Duncan

Lead Co-Founder

seanduncan@thriveschoolsf.org

505-303-6307

STATE OF NEW MEXICO



*In Recognition of
The Fulfillment of the Requirements for
School Personnel Licensure
this*

LEVEL TWO PROFESSIONAL SCHOOL BUSINESS OFFICIAL LICENSE

is issued to

MICHAEL J. VIGIL

Effective from July 1, 2015 to June 30, 2024

Licensure Number: 320539

Hanna Sander

Secretary of Education

STATEMENT OF GOVERNING BODY TO CONSULT WITH PED

We, the undersigned, make up the governing body of the THRIVE Community School, located in Santa Fe, New Mexico.

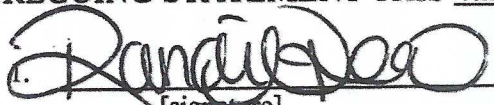
In accordance with 6.80.4.16 NMAC, we agree to consult with the New Mexico Public Education Department on any matter not covered by the manual of accounting and budgeting before taking any action related to funds held as a board of finance.


We make this statement as part of THRIVE Community School's application to the Public Education Commission for status as a board of finance under 6.80.4.16 NMAC.

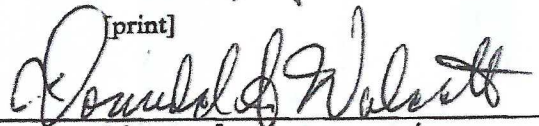
We understand that we must retain or hire a Licensed School Business Manager as soon as financial feasible and, thereafter, notify the New Mexico Public Education Commission within 30 days of hiring and/or changing in a Licensed School Business Manager for the school, and a new, signed "Affidavit of Financial Custodian" must be submitted.

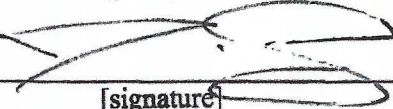
We understand that we must submit an Affidavit of Governing Body Member to the Public Education Commission within 60 days of a change in membership of our governing body.

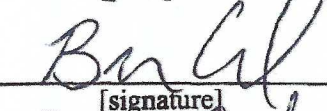
THE FOLLOWING MEMBERS OF THE [INSERT NAME OF SCHOOL] GIVE THE FOREGOING STATEMENT THIS 4th DAY OF October, 2021.

1. 
[signature]
Randi N. Valverde

2. [print]
NORA GEISS
[signature] 

3. [print]

[signature]
Donald A. Walcott
[print]

4. 
[signature]
Jose Lopez
[print]

5. 
[signature]
Brian Crider
[print]

Attach additional pages if membership exceeds five.

AFFIDAVIT OF GOVERNING BODY MEMBER

STATE OF NEW MEXICO

COUNTY OF SANTA FE

I, Randi N. Valverde, after being duly sworn, state:

1. My name is Randi N. Valverde and I reside in Santa Fe, New Mexico.
2. I am a member of the governing body of the THRIVE Community School in Santa Fe, New Mexico.
3. I attest that I am currently not a current governing body member of any other charter school authorized in the state of New Mexico.
4. I have never been a governing body member of a charter school that was suspended or failed to receive or maintain their board of finance designation.
5. I understand that as a member of the THRIVE Community School's governing body, I am entrusted with oversight of expenditure of public funds in accordance with all applicable laws, regulations and rules, including but without limitation any laws or rules pertaining to conflicts of interest, public school finance, and procurement.

Randi N. Valverde

[Signature]

10/04/21

Date

Randi N. Valverde

[Print]

VERIFICATION

The forgoing Affidavit of Governing Body Member was subscribed and sworn to before me, this 4th day of Oct., 2021.

[Notary Seal:]

Theresa P. Garduno

NOTARY PUBLIC

My commission expires: 01/23/22 ~~September 23rd, 2024.~~ TSR



OFFICIAL SEAL
Theresa Garduno
NOTARY PUBLIC - STATE OF NEW MEXICO

My Commission Expires: 01/23/22

AFFIDAVIT OF GOVERNING BODY MEMBER

STATE OF NEW MEXICO)

COUNTY OF Santa Fe)

I, Donald A. Walcott, after being duly sworn, state:

1. My name is Donald A. Walcott and I reside in Santa Fe, New Mexico.

2. I am a member of the governing body of the [insert name of school] in Thrive Community School in Santa Fe, New Mexico.

3. I attest that I am currently not a current governing body member of any other charter school authorized in the state of New Mexico.

4. I have never been a governing body member of a charter school that was suspended or failed to receive or maintain their board of finance designation.

5. I understand that as a member of the [insert name of school]'s governing body, I am entrusted with oversight of expenditure of public funds in accordance with all applicable laws, regulations and rules, including but without limitation any laws or rules pertaining to conflicts of interest, public school finance, and procurement.

Donald A. Walcott

10/5/21

[Signature]

Date

Donald A. Walcott

[Print]

VERIFICATION

The forgoing Affidavit of Governing Body Member was subscribed and sworn to before me, this 5th day of October 2021

[Notary Seal:]

WALCOTT, HENRY & WINSTON, P.C.
150 WASHINGTON AVENUE, SUITE 207
SANTA FE, NM 87501

[Signature]
NOTARY PUBLIC

My commission expires: June 22, 2025.



OFFICIAL SEAL
ALISON M. WALCOTT
NOTARY PUBLIC - STATE OF NEW MEXICO
My Commission Expires: _____

AFFIDAVIT OF GOVERNING BODY MEMBER

STATE OF NEW MEXICO

COUNTY OF SANTA FE

I, Brian Crider, after being duly sworn, state:

1. My name is Brian Crider and I reside in Santa Fe, New Mexico.
2. I am a member of the governing body of the THRIVE Community School in Santa Fe, New Mexico.
3. I attest that I am currently not a current governing body member of any other charter school authorized in the state of New Mexico.
4. I have never been a governing body member of a charter school that was suspended or failed to receive or maintain their board of finance designation.
5. I understand that as a member of the THRIVE Community School's governing body, I am entrusted with oversight of expenditure of public funds in accordance with all applicable laws, regulations and rules, including but without limitation any laws or rules pertaining to conflicts of interest, public school finance, and procurement.

Brian A Crider
[Signature]

10/9/21
Date

Brian A. Crider
[Print]

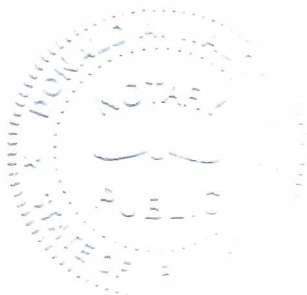
VERIFICATION

The forgoing Affidavit of Governing Body Member was subscribed and sworn to before me, this 4th day of October, 2021.

[Notary Seal:]

Donald A. [Signature]
NOTARY PUBLIC

My commission expires: 6/20/25
~~September 23rd, 2024.~~



AFFIDAVIT OF GOVERNING BODY MEMBER

STATE OF NEW MEXICO

COUNTY OF SANTA FE

I, Nora Geiss, after being duly sworn, state:

1. My name is Nora Geiss and I reside in Santa fe, New Mexico.
2. I am a member of the governing body of the THRIVE Community School in Santa Fe, New Mexico.
3. I attest that I am currently not a current governing body member of any other charter school authorized in the state of New Mexico.
4. I have never been a governing body member of a charter school that was suspended or failed to receive or maintain their board of finance designation.
5. I understand that as a member of the THRIVE Community School's governing body, I am entrusted with oversight of expenditure of public funds in accordance with all applicable laws, regulations and rules, including but without limitation any laws or rules pertaining to conflicts of interest, public school finance, and procurement.

[Handwritten Signature]

[Signature]

10.04.21

Date

Nora Geiss

[Print]

VERIFICATION

The forgoing Affidavit of Governing Body Member was subscribed and sworn to before me, this 4th day of October 2021.

[Notary Seal:]

[Handwritten Signature]

NOTARY PUBLIC

6/20/25

My commission expires: ~~September 23rd, 2024.~~



AFFIDAVIT OF GOVERNING BODY MEMBER

STATE OF NEW MEXICO)
COUNTY OF Santa Fe)

I, Jose Lopez, after being duly sworn, state:

1. My name is Jose Lopez and I reside in Prio Rancho, New Mexico.
2. I am a member of the governing body of the [insert name of school] in Santa Fe, New Mexico.
3. I attest that I am currently not a current governing body member of any other charter school authorized in the state of New Mexico.
4. I have never been a governing body member of a charter school that was suspended or failed to receive or maintain their board of finance designation.
5. I understand that as a member of the [insert name of school]'s governing body, I am entrusted with oversight of expenditure of public funds in accordance with all applicable laws, regulations and rules, including but without limitation any laws or rules pertaining to conflicts of interest, public school finance, and procurement.

[Handwritten Signature]

10/5/2021

[Signature]

Date

Jose Lopez

[Print]

VERIFICATION

The forgoing Affidavit of Governing Body Member was subscribed and sworn to before me, this 5th day of October, 2021.

[Notary Seal:]

[Handwritten Signature]
NOTARY PUBLIC

My commission expires: June 20, 2025.





September 28, 2021

Sean Duncan
THRIVE Community School
4384 Dia Nublado
Santa Fe, NM 87507

RE: Evidence of Coverage

Dear Mr. Duncan,

Please allow this letter to serve as confirmation that **THRIVE Community School** is a member participant of the New Mexico Public School Insurance Authority (NMPSIA). Both comprehensive risk management services and insurance coverage are provided to Members.

Currently, in force (but not limited to) are the following coverages:

- Crime/Employee Dishonesty – inclusive of Business Managers
- General Liability including School Board Legal Liability (Errors and Omissions)
- Employment Practice Liability and Directors and Officers (D&O) coverage
- Automobile Liability

This insurance is provided by (NMPSIA) with coverage commencing from July 1, 2021 to July 1, 2022.

We truly appreciate the opportunity to be of service to your insurance and risk management needs. If you have any questions or concerns, please do not hesitate to contact me directly.

Sincerely,

Jennifer De Jesus
Account Manager, Risk Services
818-449-9415

CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
9/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER Poms & Associates Insurance Brokers CA License #0814733 5700 Canoga Ave. #400 Woodland Hills, Ca 91367	CONTACT NAME: Risk Services PHONE (A/C, No, Ext): (800)578-8802 FAX (A/C, No): (818) 449 9449 E-MAIL ADDRESS: rservices@pomsassoc.com PRODUCER CUSTOMER ID #: 00016280														
INSURED New Mexico Public Schools Insurance Authority Member: THRIVE Community School 410 Old Taos Highway Santa Fe, NM 87501	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td>INSURER A : New Mexico Public Schools Insurance Authority</td> <td style="text-align: center;">N/A</td> </tr> <tr> <td>INSURER B : Hanover Insurance Company</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : New Mexico Public Schools Insurance Authority	N/A	INSURER B : Hanover Insurance Company		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A : New Mexico Public Schools Insurance Authority	N/A														
INSURER B : Hanover Insurance Company															
INSURER C :															
INSURER D :															
INSURER E :															
INSURER F :															

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS															
A	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td colspan="2">PROPERTY</td></tr> <tr> <td>CAUSES OF LOSS</td> <td>DEDUCTIBLES</td> </tr> <tr> <td>BASIC</td> <td>BUILDING</td> </tr> <tr> <td>BROAD</td> <td rowspan="2">CONTENTS</td> </tr> <tr> <td><input checked="" type="checkbox"/> SPECIAL</td> </tr> <tr> <td><input checked="" type="checkbox"/> EARTHQUAKE</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> WIND</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> FLOOD</td> <td></td> </tr> </table>	PROPERTY		CAUSES OF LOSS	DEDUCTIBLES	BASIC	BUILDING	BROAD	CONTENTS	<input checked="" type="checkbox"/> SPECIAL	<input checked="" type="checkbox"/> EARTHQUAKE		<input checked="" type="checkbox"/> WIND		<input checked="" type="checkbox"/> FLOOD		MOC NO. P0024	07/01/2021	07/01/2022	<input checked="" type="checkbox"/> BUILDING	\$ Per Schedule
		PROPERTY																			
		CAUSES OF LOSS	DEDUCTIBLES																		
		BASIC	BUILDING																		
		BROAD	CONTENTS																		
		<input checked="" type="checkbox"/> SPECIAL																			
		<input checked="" type="checkbox"/> EARTHQUAKE																			
		<input checked="" type="checkbox"/> WIND																			
<input checked="" type="checkbox"/> FLOOD																					
<input type="checkbox"/> PERSONAL PROPERTY	\$ On File																				
<input type="checkbox"/> BUSINESS INCOME	\$																				
<input checked="" type="checkbox"/> EXTRA EXPENSE	\$ Per Schedule																				
<input type="checkbox"/> RENTAL VALUE	\$ On File																				
<input type="checkbox"/> BLANKET BUILDING	\$																				
<input type="checkbox"/> BLANKET PERS PROP	\$																				
<input type="checkbox"/> BLANKET BLDG & PP	\$																				
<input checked="" type="checkbox"/> CONTENTS	\$ Per Schedule																				
<input type="checkbox"/>	\$ On File																				
	INLAND MARINE	TYPE OF POLICY				\$															
	CAUSES OF LOSS					\$															
	NAMED PERILS	POLICY NUMBER				\$															
						\$															
B	<input checked="" type="checkbox"/> CRIME	H274489	07/01/2021	07/01/2022	<input checked="" type="checkbox"/> Employee Theft	\$ 2,000,000															
	<input checked="" type="checkbox"/> Forgery or Altercation				\$ 2,000,000																
	<input checked="" type="checkbox"/> Faithful Performance				\$ 1,000,000																
	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$															
						\$															
A	AUTO PHYSICAL DAMAGE (COMPREHENSIVE/COLLISION)	MOC NO. P0024	07/01/2021	07/01/2022	Deductible Comp \$750	\$ Tort Limit															
					Deductible Coll \$750	\$ Tort Limit															

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Re: THRIVE Community School. Real Property Deductible = \$2,500. Crime deductible = \$750.

CERTIFICATE HOLDER Public Education Commission	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	--



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Poms & Associates Insurance Brokers CA License #0814733 5700 Canoga Avenue Woodland Hills, CA 91367	CONTACT NAME: Risk Services	
	PHONE (A/C, No, Ext): (800) 578-8802	FAX (A/C, No): (818)449-9449
	E-MAIL ADDRESS: rservices@pomsassoc.com	
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : New Mexico Public Schools Insurance Authority		N/A
INSURER B : Safety National		
INSURER C :		
INSURER D :		
INSURER E :		
INSURER F :		

INSURED New Mexico Public Schools Insurance Authority Member: THRIVE Community School 4110 Old Taos Highway Santa Fe, NM 87501

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR Owners Contractors Protective Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC			MOC NO. L0024	07/01/2021	07/01/2022	EACH OCCURRENCE \$ Tort Limit
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ Tort Limit
							MED EXP (Any one person) \$ Tort Limit
							PERSONAL & ADV INJURY \$ Tort Limit
							GENERAL AGGREGATE \$ Tort Limit
							PRODUCTS - COMP/OP AGG \$ Tort Limit
							Maximum Liability \$ 1,050,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			MOC NO. L0024	07/01/2021	07/01/2022	COMBINED SINGLE LIMIT (Ea accident) \$ Tort Limit
							BODILY INJURY (Per person) \$ Tort Limit
							BODILY INJURY (Per accident) \$ Tort Limit
							PROPERTY DAMAGE (Per accident) \$ Tort Limit
							Maximum Liability \$ 1,050,000
	UMBRELLA LIAB EXCESS LIAB						EACH OCCURRENCE
							AGGREGATE
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
A	PROFESSIONAL LIABILITY			MOC NO. L0024	07/01/2021	07/01/2022	Each Occurrence \$ Tort Limit Maximum Liability \$1,050,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

See attached New Mexico Tort Claims Act Section 41-4-19: Maximum Liability Summary. General Liability Retention=\$750K. Auto Liability Retention=\$750K.
 Re: THRIVE Community School.

CERTIFICATE HOLDER

Public Education Commission

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page _____ of _____

AGENCY Poms & Associates Insurance Brokers		NAMED INSURED New Mexico Public Schools Insurance Authority	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: _____ FORM TITLE: : Notes

Summary of New Mexico Tort Claims Act Section 41-4-19:
Maximum Liability Governmental entities and agencies, including public schools, public charter schools and community colleges and universities are granted immunity from liability.
Commercial General Liability Products and Completed Operations Professional Liability Contractual Liability
Imposed by New Mexico Tort Claims Act [NMSA 1975 §41-4-1 through 41-4-29]
\$400,000 Bodily Injury Per Person
\$200,000 Property Damage Per Property Address
\$300,000 Medical
\$750,000 Per Occurrence
\$1,050,000 Combined Limit/Maximum Liability