

California Department of Education
2017-18 End-of-Year Data Submission Certification Letter
Workforce Innovation and Opportunity Act
Title II: Adult Education and Family Literacy Act

This certifies that the enclosed end-of-year data and reports are accurate and complete. This is the official data submission for this agency for the 2017–18 program year. I certify that there are complete records to support all TOPSpro® Enterprise data submitted and that all programs have been conducted in accordance with federal and state laws and regulations.

I have enclosed or submitted the following data submission requirements, checked below, to comply with the 2017–18 end-of-year requirements.

Completed TOPSpro® Enterprise Adult Education Personnel, Teachers' Years of Experience, and Teacher Certification tables

Data Integrity Report

Payment Points Summary Report

Completed and Signed End-of-Year Data Submission Certification Letter (this document)

TOPSpro® Enterprise Data:

Completed review of TOPSpro® Enterprise Online on _____

OR Sent electronically on _____

OR Mailed on _____

I understand that the Comprehensive Adult Student Assessment Systems (CASAS) will return an official verified Payment Points Summary Report to our agency based on the data submitted. At that time, our agency will have the opportunity to compare the official Payment Points Summary Report produced by the CASAS to the report we produced internally. If discrepancies exist, our agency will have the opportunity to contact the CASAS as well as your California Department of Educational Regional Consultant to resolve disputes during this time period:

- The CASAS must receive all data submission requirements no later than **July 15, 2018**.
- All data submission disputes must be resolved no later than **August 15, 2018**.

Agency Name: _____

Individual Completing Form and Title (PRINT):

Name: _____

Title: _____

Date: _____

Signature: _____

Agency's Authorized Agent and Title (PRINT):

Name: _____

Title: _____

Telephone: _____

Signature: _____

Date: _____

Primary Contact E-mail Address: _____