

Form A: Intent to Submit an Application for the Title IV, Part A 2018 Student Support and Academic Enrichment Grant Program

Please return this Intent to Submit an Application form to the California Department of Education (CDE) at the email address or fax shown below to submit an application for the 2018 Title IV, Part A Student Support and Academic Enrichment Grant Program. The CDE will accept only applications for which it has received the Intent to Submit an Application form. The form must be received by the CDE via email or fax by 5 p.m. on **Wednesday, September 12, 2018.**

Return this form to:

Educator Excellence and Equity Division

Fax: 916-319-0136

Email: EEED@cde.ca.gov

Subject line: Title IVA Student Support and Academic Enrichment Grant Program

Official Applicant*:

Contact Person/Title:

Telephone:

Email address:

Please select the categories for which you intend to apply:

Category A: Well-Rounded
Educational Opportunities

Category B: Safe and
Healthy Students

Category C: Effective
Use of Technology

Signature of Authorizing Officials: By signing this document, I certify the local educational agency is eligible to apply for Title IV, Part A Student Support and Academic Enrichment Grant Program funding and the application will fulfill all requirements of the statute and regulations related to this funding.

LEA Superintendent or Designee Signature:

_____ Date: _____

*If applying as a consortium, please complete page two of this form.

If applying as a consortium, please provide the names of additional LEAs, grant contacts, and titles. If the consortium consists of more than six LEAs, please attach a document with all LEA names and grant contacts and titles.

LEA Name:

Contact Person/Title:

LEA Name:

Contact Person/Title:

LEA Name:

Contact Person/Title:

LEA Name:

Contact Person/Title:

LEA Name:

Contact Person/Title: