

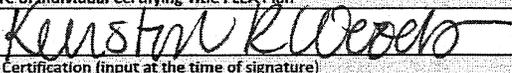


**Part 1: Local Educational Agency Information**

<b>Name of Local Educational Agency</b> Potomac Lighthouse Public Charter School	<b>Name of LEA Executive Director (Public Charter Schools Only)</b> Ramon Richardson
<b>Full Address of Local Educational Agency</b> 4401 8th Street NE, Washington, DC 20017	<b>Email Address of LEA Executive Director (Public Charter Schools Only)</b> r Richardson@lighthouse-academies.org
<b>Main Telephone Number of Local Educational Agency</b> (202) 526-6003	<b>Telephone Number of LEA Executive Director (Public Charter Schools Only)</b> (202) 526-6003
<b>Name of Primary LEA Contact for Title I LEA Plan</b> Linda Ahronian	<b>Name of Additional LEA Contact for Title I LEA Plan</b> Phil Bailey
<b>Position Title of Primary LEA Contact for Title I LEA Plan</b> Controller	<b>Position Title of Additional LEA Contact for Title I LEA Plan</b> School Operations Manager
<b>Email Address of Primary LEA Contact for Title I LEA Plan</b> lahronian@lighthouse-academies.org	<b>Email Address of Additional LEA Contact for Title I LEA Plan</b> pbailey@lighthouse-academies.org
<b>Telephone Number of Primary LEA Contact for Title I LEA Plan</b> (508) 626-0901 ext. 214	<b>Telephone Number of Additional LEA Contact for Title I LEA Plan</b> (202) 526-6003

**Part 2: LEA Certification**

I certify that all of the information contained in this application is true and accurate to the best of my knowledge.  
 Additionally, I certify that the LEA agrees to all assurances included in the application.  
 I have been authorized to file this application on behalf of the agency named above.

<b>Name of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only)</b> Keirston Woods	<b>Signature of Individual Certifying Title I LEA Plan</b> 
<b>Title of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only)</b> Board Chairperson	<b>Date of Certification (input at the time of signature)</b> 9/16/13

SUBMIT BOTH A MICROSOFT EXCEL VERSION OF THIS FULL WORKBOOK AND A SIGNED, SCANNED COPY OF THIS PAGE BY EMAIL TO [CON.APP@DC.GOV](mailto:CON.APP@DC.GOV).

**OSSE Use Only**

<b>Date Title I LEA Plan First Received:</b>	
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