OSSE

Part 1: Local Educational Agency Information

Name of Local Educational Agency Imagine Southeast Public Charter School	**Name of LEA Executive Director (Public Charter Schools Only)** Michael DePass
Full Address of Local Educational Agency 3100 Martin Luther King Jr. Ave. SE, Washington, DC, 20032	**Email Address of LEA Executive Director (Public Charter Schools Only)** michael.depass@imagineschools.com
Main Telephone Number of Local Educational Agency 202-561-1622	**Telephone Number of LEA Executive Director (Public Charter Schools Only)** 301-776-4925
Name of Primary LEA Contact for Consolidated Application Programs Melissa Winters	**Name of Additional LEA Contact for Consolidated Application Programs** Katrina Settles
Position Title of Primary LEA Contact for Consolidated Application Programs Compliance Officer	**Position Title of Additional LEA Contact for Consolidated Application Programs** Business Manager
Email Address of Primary LEA Contact for Consolidated Application Programs melissa.winters@imagineschools.com	**Email Address of Additional LEA Contact for Consolidated Application Programs** katrina.settles@imagineschools.com
Telephone Number of Primary LEA Contact for Consolidated Application Programs 202-561-1622	**Telephone Number of Additional LEA Contact for Consolidated Application Programs** 202-561-1622

Part 2: Programs for Which the LEA is Applying for Funding

Below, input the allocation, provided by the State Education Agency, for each program for which the LEA is applying for funding through this application.
For Title III, Part A, the LEA is eligible to apply through this application only if the allocation is at least $10,000.
Please note that allocations are subject to change according to the applicable federal and state statutes, regulations, and policies.

LEA Allocation for Title I, Part A	LEA Allocation for Title II, Part A	LEA Allocation for Title III, Part A
$ 431,256.88	$ 89,085.61	

Part 3: Schedule for Submission of Reimbursement Requests

Please indicate, by checking the applicable box below, the schedule that the LEA will follow for Federal Fiscal Year 2012 (July 1, 2012 - September 30, 2014, including the "Tydings" period) for submitting reimbursement requests for all grants included in this application in order to maintain regular drawdowns of federal funds. From among these options, the LEA has the flexibility to choose a schedule that best meets its needs.

Monthly (12 workbooks per year)	Bi-Monthly (6 workbooks per year)	Quarterly (4 workbooks per year)
X		

Part 4: LEA Certification of Application

By signing below, the Applicant certifies that all of the information contained in this application is true and accurate to the best of its knowledge.
Additionally, the Applicant certifies that it has read and agrees to all additional assurances and certifications included in Phase II of the application.

Name of Individual Certifying Phase II Application (Board Chairperson or Chancellor only) Dr. Barbara Bazron	**Signature of Individual Certifying Phase II Application** Barbara J Bazron
Title of Individual Certifying Phase II Application (Board Chairperson or Chancellor only) Chairperson of the Board of Directors	**Date of Certification (input at the time of signature)** 11/15/13

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.

OSSE Use Only

Date Phase II Application First Received:	
Date Phase II Application Approved (first date for reimbursement):	