



### Part 1: Local Educational Agency Information

<b>Name of Local Educational Agency</b> EAGLE ACADEMY PUBLIC CHARTER SCHOOL	<b>Name of LEA Executive Director (Public Charter Schools Only)</b> CASSANDRA S. PINKNEY
<b>Full Address of Local Educational Agency</b> 475 SCHOOL ST, SW; WASHINGTON DC 20024	<b>Email Address of LEA Executive Director (Public Charter Schools Only)</b> cpinkney@eagleacademypcs.org
<b>Main Telephone Number of Local Educational Agency</b> 202-544-2646	<b>Telephone Number of LEA Executive Director (Public Charter Schools Only)</b> 202-544-2646
<b>Name of Primary LEA Contact for Title I LEA Plan</b> JOE M. SMITH	<b>Name of Additional LEA Contact for Title I LEA Plan</b> ANDREA C. SHORTER
<b>Position Title of Primary LEA Contact for Title I LEA Plan</b> CHIEF FINANCIAL OFFICER	<b>Position Title of Additional LEA Contact for Title I LEA Plan</b> ACCOUNTANT
<b>Email Address of Primary LEA Contact for Title I LEA Plan</b> jsmith@eagleacademypcs.org	<b>Email Address of Additional LEA Contact for Title I LEA Plan</b> ashorter@acsca.net
<b>Telephone Number of Primary LEA Contact for Title I LEA Plan</b> 202-544-2646	<b>Telephone Number of Additional LEA Contact for Title I LEA Plan</b> 301-996-3909

### 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> DAVENE M. WHITE	<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> CHAIRPERSON OF BOARD OF DIRECTORS	<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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