



Office of the
State Superintendent of Education

Part 1: Local Educational Agency Information	
Full Legal Name of Local Educational Agency Washington Yu Ying PCS	Name of LEA Executive Director (Public Charter Schools Only) Maquita Alexander
Full Address of Local Educational Agency 220 Taylor St, NE, Washington, DC 20017	Email Address of LEA Executive Director (Public Charter Schools Only) Maquita@washingtonyuying.org
Main Telephone Number of Local Educational Agency 202-635-1950	Telephone Number of LEA Executive Director (Public Charter Schools Only) 202-635-1950
Name of Primary LEA Contact for Consolidated Application Programs Kate Dart	Name of Additional LEA Contact for Consolidated Application Programs Cheri Harrington
Position Title of Primary LEA Contact for Consolidated Application Programs Office Manager	Position Title of Additional LEA Contact for Consolidated Application Programs COO
Email Address of Primary LEA Contact for Consolidated Application Programs compliance@washingtonyuying.org	Email Address of Additional LEA Contact for Consolidated Application Programs compliance@washingtonyuying.org
Telephone Number of Primary LEA Contact for Consolidated Application Programs 202-635-1950	Telephone Number of Additional LEA Contact for Consolidated Application Programs 202-635-1950
Part 2: LEA Certification of Assurances	
All assurances and certifications included in Phase I of the application represent requirements associated with the federal grant programs included in the Consolidated Application. By signing below, the Applicant certifies that it has read and agrees to all assurances and certifications.	
Name of Individual Certifying Phase I Application (Board Chairperson or Chancellor only) Christina Murtaugh	Signature of Individual Certifying Phase I Application
Title of Individual Certifying Phase I Application (Board Chairperson or Chancellor only) Board Chairperson	Date of Certification (Input at the time of signature) 6/28/13
Part 3: Additional LEA Certification	
The Phase II application must be returned to the Office of the State Superintendent in accordance with the established deadlines. The Superintendent will allow a minimum of 90 days for completion. By signing below, the Applicant certifies that it will submit an approvable Phase II application in accordance with the deadlines or risk the denial of funding under this Phase I application.	
Name of Individual Certifying Phase I Application (Board Chairperson or Chancellor only) Christina Murtaugh	Signature of Individual Certifying Phase I Application
Title of Individual Certifying Phase I Application (Board Chairperson or Chancellor only) Chairperson of the Board of Directors	Date of Certification (Input at the time of signature) 6/28/13
SUBMIT BOTH A MICROSOFT EXCEL VERSION OF THIS FULL WORKBOOK AND A SIGNED, SCANNED OF THIS PAGE BY EMAIL TO CON_APP@DC.GOV .	
OSSE Use Only	
Date Assurances Received:	
Date Assurances Complete (first date for obligation):	