OSSE

Part 1: Local Educational Agency Information

Name of Local Educational Agency Community Academy Public Charter School	Name of LEA Executive Director (Public Charter Schools Only) Kent Amos
Full Address of Local Educational Agency 1351 Nicholson Street, NW Washington, DC 20011	Email Address of LEA Executive Director (Public Charter Schools Only) kentamos@capcs.org
Main Telephone Number of Local Educational Agency (202) 243-5437 (KIDS)	Telephone Number of LEA Executive Director (Public Charter Schools Only) (202) 545-1251
Name of Primary LEA Contact for Title I LEA Plan Toby V. Hairston	Name of Additional LEA Contact for Title I LEA Plan Brenda Bethea
Position Title of Primary LEA Contact for Title I LEA Plan Grants Manager	Position Title of Additional LEA Contact for Title I LEA Plan Head of Schools
Email Address of Primary LEA Contact for Title I LEA Plan tobyhairston@capcs.org	Email Address of Additional LEA Contact for Title I LEA Plan brendabethea@capcs.org
Telephone Number of Primary LEA Contact for Title I LEA Plan (202) 545-3098	Telephone Number of Additional LEA Contact for Title I LEA Plan (202) 545-1259

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.

Name of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only) Shelley Rawlings	Signature of Individual Certifying Title I LEA Plan Shelley Rawlings
Title of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only) Board Chairperson	Date of Certification (your or the time of signature) 10/9/12

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 Title I LEA Plan First Received:	

OSSE

Part 1: Local Educational Agency Information

Name of Local Educational Agency Community Academy Public Charter School	Name of LEA Executive Director (Public Charter Schools Only) Kent Amos
Full Address of Local Educational Agency 1351 Nicholson Street, NW Washington, DC 20011	Email Address of LEA Executive Director (Public Charter Schools Only) kentamos@capcs.org
Main Telephone Number of Local Educational Agency (202) 243-5437 (KIDS)	Telephone Number of LEA Executive Director (Public Charter Schools Only) (202) 545-1251
Name of Primary LEA Contact for Consolidated Application Programs Toby V. Hairston	Name of Additional LEA Contact for Consolidated Application Programs Brenda Bethea
Position Title of Primary LEA Contact for Consolidated Application Programs Grants Manager	Position Title of Additional LEA Contact for Consolidated Application Programs Head of Schools
Email Address of Primary LEA Contact for Consolidated Application Programs tobyhairston@capcs.org	Email Address of Additional LEA Contact for Consolidated Application Programs brendabethea@capcs.org
Telephone Number of Primary LEA Contact for Consolidated Application Programs (202) 545-3098	Telephone Number of Additional LEA Contact for Consolidated Application Programs (202) 545-1259

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
$ 822,765.05	$ 209,661.06	$ 35,915.61

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) Shelley Rawlings	Signature of Individual Certifying Phase II Application Shelley Rawlings
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) 10/9/12

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.

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