OSSE

Part 1: Local Educational Agency Information

Name of School	**Name of School Principal or Executive Director (Public Charter Schools Only)**
Meridian Public Charter School	Dr. Robinette Breedlove
Full Address of School	**Email Address of School Principal or Executive Director (Public Charter Schools Only)**
2120 13th Street, NW Washington, DC 20009	rbreedlove@meridian-dc.org
Main Telephone Number of School	**Telephone Number of School Principal or Executive Director (Public Charter Schools Only)**
(202) 387-9830	(202) 387-9830 x104
Name of Primary School Contact for Title I School Plan	**Name of Additional School Contact for Title I School Plan**
Dr. Robinette Breedlove	Darryl Reed
Position Title of Primary School Contact for Title I School Plan	**Position Title of Additional School Contact for Title I School Plan**
Principal	Director of Special Programs
Email Address of Primary School Contact for Title I School Plan	**Email Address of Additional School Contact for Title I School Plan**
rbreedlove@meridian-dc.org	dreed@meridian-dc.org
Telephone Number of Primary School Contact for Title I School Plan	**Telephone Number of Additional School Contact for Title I School Plan**
(202) 387-9830 x104	(202) 387-9830 x292

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 School Plan (Chief Academic Officer or Executive Director)	**Signature of Individual Certifying Title I School Plan (Chief Academic Officer or Executive Directo**
Dr. Ronald G. Ridker	Ronald G. Ridker
Title of Individual Certifying Title I School Plan (Chief Academic Officer or Executive Director)	**Date of Certification (input at the time of signature)**
Board Chair	9/14/2012

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 School Plan First Received:	