

FY 22 Affirmation of Timely/Meaningful Ongoing Consultation and Equitable Services

No Eligible PS *Elementary and Secondary Education Act- P.L. 107 – 110 ~ SECTION 1117 & 8501*

Local Education Agency (LEA) Ginsburg Elementary School
 LEA Federal Program Official Sarah MacIntosh
 LEA Federal Program Contact Phone: 602-173-8923 Email: s.macintosh@ges.org
 Private School Name _____
 Private School Address _____ In District OR Out of District
 Private School Official _____
 Private School Contact Phone: _____ Email: _____

LEA Federal Program Official: Select what is applicable from the following statements. LEAs might check more than one.

- Check if there are **NO eligible private schools** located within the LEA’s boundaries
- Check if LEA has students residing within the LEA and are providing services to students attending a private school **inside** LEA boundaries.
- Check if LEA has students residing within the LEA but are providing services to students attending a private school **outside** of LEA boundaries.
- Check if the private school has not responded to LEA’s repeated, good-faith attempts (3) for consultation.
- Check if Private School opts to ‘not’ participate.

Private School Official: Complete the following chart showing private school participation for each **LEA funding source/s**

| Title I-A | | Title II-A | | Title IV-A | | Title III- A | | Title I-C | | Title IV-B | |
|------------------------------|-----------------------------|------------------------------|-----------------------------|------------------------------|-----------------------------|------------------------------|-----------------------------|------------------------------|-----------------------------|------------------------------|-----------------------------|
| YES <input type="checkbox"/> | NO <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

Directions: Both school officials (private and public) must initial under either YES or NO for each statement below. By doing so, it documents following the ongoing consultation AND the equitable services implementation. Comments may be made in the Comments section. **Upload to designated location for each funding source.**

Part 1: Timely and Meaningful Consultation Affirmation – Initial boxes, sign and date and/or Ongoing Consultation- Due: May 1.

| Official | Yes | No | Consultation Requirements (ESSA Sections 1117 and 8501) |
|----------------|--------------------------|--------------------------|--|
| Private School | <input type="checkbox"/> | <input type="checkbox"/> | Timely and meaningful consultation occurred regarding the needs and services of eligible children and their teachers and families. Initial Consultation Dates: _____ |
| Public School | <input type="checkbox"/> | <input type="checkbox"/> | |
| Private School | <input type="checkbox"/> | <input type="checkbox"/> | The LEA gave due consideration to the views of the private school official. |
| Public School | <input type="checkbox"/> | <input type="checkbox"/> | |
| Private School | <input type="checkbox"/> | <input type="checkbox"/> | The program design/provision of services agreed upon by the LEA and private school is equitable. Date instructional services are to begin: _____ |
| Public School | <input type="checkbox"/> | <input type="checkbox"/> | |

Signature of Public-School Official _____ Date: _____

Signature of Private School Official _____ Date: _____

Part 2: Equitable Provision of Services - Initial boxes, sign and date (If equitable services were provided in FY21, the due date for Part 2 is upon submittal of FY21 Completion Report. **Upload to CR Related Documents.**)

| Official | Yes | No | Consultation Requirements (ESSA Sections 1117 and 8501) |
|----------------|--------------------------|--------------------------|--|
| Private School | <input type="checkbox"/> | <input type="checkbox"/> | Services began as agreed between the LEA and private school during consultation. Date services began: _____ |
| Public School | <input type="checkbox"/> | <input type="checkbox"/> | |
| Private School | <input type="checkbox"/> | <input type="checkbox"/> | The LEA gave due consideration to the views of the private school official during ongoing consultation. |
| Public School | <input type="checkbox"/> | <input type="checkbox"/> | |
| Private School | <input type="checkbox"/> | <input type="checkbox"/> | Satisfactory services were provided during the school year. |
| Public School | <input type="checkbox"/> | <input type="checkbox"/> | |

Signature of Public-School Official _____ Date: _____

Signature of Private School Official _____ Date: _____

Comments: