



Name of Site: _____

AFFIRMATION OF CONSULTATION FORM (Participation of Private School Students)

Nita M. Lowey 21st Century Community Learning Centers (21st CCLC)

A

Deadline for submission of completed forms:

Scan and upload to ADE as part of the application in the Grants Management System by 11:59 PM on March 4, 2024

FORM A

Are any private schools located in the area to be served by the proposed program? Select your response below.

☐ **NO.** Check if there are no eligible private schools located within the site's boundaries (signature and date required below).

☐ **YES. *NEW*** We are a **charter school**; charter schools are now required (A-3: Title VIII, Part F of the Elementary and Secondary Education Act Equitable Services Non-Regulatory Guidance 2023) to complete the remainder of the form (signature and date required below). List all private schools, within your geographic area, that were consulted. Print name, title, and phone number of the school official who was consulted. Provide date(s) and type(s) of consultation attempts (e.g., face-to-face, or virtual meeting, e-mail, fax, telephone call, letter, etc.) and reason(s) for declining.

☐ **YES.** We are a **district school**; Complete the remainder of the form (signature and date required below). List all private schools, within your attendance boundaries, that were consulted. Print name, title, and phone number of the school official who was consulted. Provide date(s) and type(s) of consultation attempts (e.g., face-to-face, or virtual meeting, e-mail, fax, telephone call, letter, etc.) and reason(s) for declining.

PRIVATE SCHOOL CONSULTATION		Form A
1. Private School Name:		
Print Name & Title of School Official:		Phone & Email
Date(s) and Type(s) of 3 good faith attempts for consultation:		
Did this private school decline to participate? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list reason(s) for declining to participate.	
Must be discussed during the consultation.	Provide contact information to the private school for any questions over the duration of the grant.	
2. Private School Name:		
Print Name & Title of School Official:		Phone & Email
Date(s) and Type(s) of 3 good faith attempts for consultation:		
Did this private school decline to participate? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list reason(s) for declining to participate.	
Must be discussed during the consultation.	Provide contact information to the private school for any questions over the duration of the grant.	



The Nita M. Lowey 21st Century Community Learning Centers afterschool program is funded by a federal grant from the U.S. Department of Education and administered by the Arizona Department of Education. For more information visit: <http://www.azed.gov/21stcclc/>



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FORM A

PRIVATE SCHOOL CONSULTATION, Continued		Form A
3. Private School Name:		
Print Name & Title of School Official:		Phone & Email
Date(s) and Type(s) of 3 good faith attempts for consultation:		
Did this private school decline to participate? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list reason(s) for declining to participate.	
Must be discussed during the consultation.	Provide contact information to the private school for any questions over the duration of the grant.	

The following topics may be discussed during the consultation process:

- How the student's needs will be identified and if the student meets the eligibility criteria
- What services will be offered
- How and when decisions about the delivery of services will be made
- How, where, and by whom services will be provided (size and scope of equitable services)
- How services will be academically assessed and improved based upon assessment results
- How student level assessment results will be shared with the Nita M. Lowey 21st Century Community Learning Centers (21st CCLC) site as required for federal reporting
- How the student's attendance data will be collected in the awarded school's Student Information System
- Thorough consideration of the views of private school officials regarding use of a third-party contractor(s) for services
- When services will be provided

Printed Name of Person Completing Form	
Printed Title	
Signature of Person Completing Form	Date Signed <i>Mo./Day/Yr.</i>

Note: If the school/site application is awarded, the District (Lead Fiscal Agent) should include the 21st CCLC Title IV-B program along with its other federal programs when completing subsequent annual private school consultation for the duration of the 21st CCLC grant award.



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