DROPOUT RECOVERY PROGRAM APPLICATION SHORTLIST

Documentation of LEA and School information. LEA Name: LEA Entity ID: LEA CTDS: LEA Type: School District **Charter District** School Name: School Entity ID: School CTDS: Primary contact: Fmail: Role: Phone: By checking each, below, you affirm completion of each individual requirement, some of which must include attachments: Application for Alternative Status was submitted by March 31st. DRP is within a Charter District. If so: Charter District has received approval by Arizona State Board for Charter Schools to operate DRP, with associated documentation. **Submission requirements: Attach** complete Dropout Recovery Statement of Assurance. **Attach** school-specific Written Learning Plan with all required components. Attach LEA-approved definition of Satisfactory Monthly Progress meeting all requirements. **EMO** requirements: Affirm and attach the following as necessary. DRP receives services from a 3rd party vendor. If so, also complete: Provide Regional Accreditation Documentation of 3rd-Party Provider LEA affirms and attests to proper licensure of all teachers Complete submissions will receive a response within 30 days. Name:

Date:

Signature: