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|  **Name of Grant Program:** Early Literacy Consortium Grant |  **Fund Code: 726** |

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| PART IV – Submission Assurances Form |

This assurance form provides the Massachusetts Department of Elementary and Secondary Education with the confidence that all appropriate parties have been apprisedof this grant submission.

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| District Name: |  |

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| **District Assurances** |
| By signing this form, the district attests to the following:* State funds are to be used in accordance with the FY24 Early Consortium Grant
* The district will fully participate in at least one convening of all partners in the proposed consortium before June 30, 2024.
 |

**Required for all participating LEAs:** Check (ü) to acknowledge that if awarded this grant, the district will be required to submit early literacy screening data to DESE at the end of each award year FY24, June 30, 2024 and FY25, June 30, 2025.

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| I acknowledge that if award this grant, the district will be required to submit early literacy screening data to DESE at the end of each award year. |  |
| Approved early literacy screening assessment used by the district:  |  |
| Contact Information for District’s point person for Data Collection: |  |

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| --- | --- |
| **Typed Name of District Leader** |  |
| **Signature of District Leader** |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **Typed Name of Grant Contact** |  |
| **Signature of Grant Contact** |  |
| **Date:** |  |