



Virginia Department of Education  
Office of ESEA Programs  
P. O. Box 2120  
Richmond, Virginia 23218-2120

Title I, Part C, Education of Migratory Children

2024-2025 Participating Regional Program Member  
CERTIFICATION

**For each member of the Regional Program Agreement: Print a paper copy of this page. Complete this certification page with original signatures and submit it to the lead school division.**

By signing below, the participating regional member agrees to submit all required financial information for reimbursement purposes to the lead school division. Additionally, the participating regional member agrees to implement the goals and objectives of the grant as submitted by the lead school division.

To be Completed by School Division							
Applicant (Legal Name of Agency):				Division Number:		Migrant Coordinator:	
Charlottesville City Public Schools				104		Jeannie Pfautz	
Mailing Address (Street, City or Town, Zip Code):				Mailing Address:		X same as applicant address	
1400 Melbourne Road, Central Office #2 Charlottesville, VA 22901							
Phone (ext):		434-245-2421	Fax:		Phone (ext):		434-245-2421
Regional Lead Division:		Albemarle		Coordinator's E-mail:		pfautzj1@charlottesvilleschools.org	

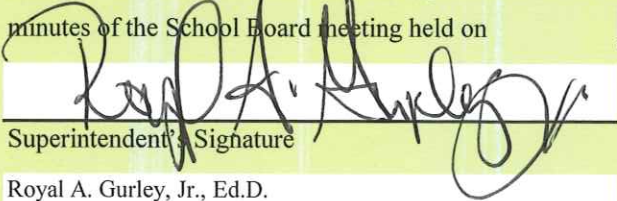
**LOCAL EDUCATIONAL AGENCY CERTIFICATION**

**Use of Funds:** The applicant designated above applies for an allocation of federal assistance as appropriated under the *ESEA*. Funds are available to support local education reform efforts that are consistent with statewide education reform efforts to: 1) provide funding to implement promising education reform programs and school improvement programs based on evidence-based research; 2) provide a continuing source of innovative and educational improvement; 3) meet the educational needs of all students; and 4) develop and implement education programs to improve student achievement and teacher performance.

**Assurances:** The local educational agency assures that the Migrant Education Program will be administered and implemented in compliance with all applicable statutes, regulations, policies, and program plans. **Additionally, the local educational agency agrees by signing below to implement the general and program specific assurances located in the "Application Guidelines, Instructions, and Assurances" packet. The assurances are to be retained at the division level.**

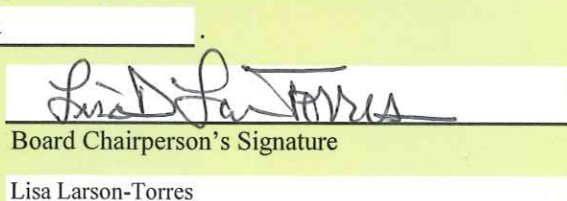
**Certification:** We hereby certify that, to the best of our knowledge, the information contained in this application is correct. The agency named below has authorized us as its representatives to file this application, and such action is recorded in the

minutes of the School Board meeting held on 5/2/2024.



\_\_\_\_\_  
Superintendent's Signature

Royal A. Gurley, Jr., Ed.D.



\_\_\_\_\_  
Board Chairperson's Signature

Lisa Larson-Torres

\_\_\_\_\_  
Superintendent's Name

5/2/2024

\_\_\_\_\_  
Date

\_\_\_\_\_  
Board Chairperson's Name

5/2/2024

\_\_\_\_\_  
Date