

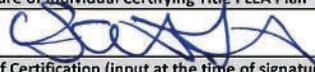


Part 1: Local Educational Agency Information

Name of Local Educational Agency Creative Minds International Public Charter School	Name of LEA Executive Director (Public Charter Schools Only) Golnar Abedin
Full Address of Local Educational Agency 3224 16th St. NW Washington, DC 20009	Email Address of LEA Executive Director (Public Charter Schools Only) golnar.abedin@creativemindspcs.org
Main Telephone Number of Local Educational Agency (202)588-0370	Telephone Number of LEA Executive Director (Public Charter Schools Only) (202)588-0370
Name of Primary LEA Contact for Title I LEA Plan John Roussel	Name of Additional LEA Contact for Title I LEA Plan James Lafferty-Furphy
Position Title of Primary LEA Contact for Title I LEA Plan Consultant	Position Title of Additional LEA Contact for Title I LEA Plan Director of Operations
Email Address of Primary LEA Contact for Title I LEA Plan john@ed-ops.com	Email Address of Additional LEA Contact for Title I LEA Plan james.lafferty-furphy@creativemindspcs.org
Telephone Number of Primary LEA Contact for Title I LEA Plan (310)710-4559	Telephone Number of Additional LEA Contact for Title I LEA Plan (202)588-0370

Part 2: LEA Certification

I certify that all of the information contained in this application is true and accurate to the best of my knowledge.
 Additionally, I certify that the LEA agrees to all assurances included in the application.
 I have been authorized to file this application on behalf of the agency named above.

Name of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only) Yamillett Fuentes	Signature of Individual Certifying Title I LEA Plan 
Title of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only) Board Chairperson	Date of Certification (input at the time of signature) 9/26/13

SUBMIT BOTH A MICROSOFT EXCEL VERSION OF THIS FULL WORKBOOK AND A SIGNED, SCANNED COPY OF THIS PAGE BY EMAIL TO CON.APP@DC.GOV.

OSSE Use Only

Date Title I LEA Plan First Received:	
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