



### Part 1: Local Educational Agency Information

<b>Name of Local Educational Agency</b>	<b>Name of LEA Executive Director (Public Charter Schools Only)</b>
The Arts and Technology Academy Public Charter School	Allison Artis
<b>Full Address of Local Educational Agency</b>	<b>Email Address of LEA Executive Director (Public Charter Schools Only)</b>
5300 Blaine Street, N.E., Washington, D.C., 20019	aaartis@dcata.org
<b>Main Telephone Number of Local Educational Agency</b>	<b>Telephone Number of LEA Executive Director (Public Charter Schools Only)</b>
202-398-6811	202-398-6811
<b>Name of Primary LEA Contact for Title I LEA Plan</b>	<b>Name of Additional LEA Contact for Title I LEA Plan</b>
Rich Blickendorfer	Sarai Francois
<b>Position Title of Primary LEA Contact for Title I LEA Plan</b>	<b>Position Title of Additional LEA Contact for Title I LEA Plan</b>
School Administrator	Finance Manager
<b>Email Address of Primary LEA Contact for Title I LEA Plan</b>	<b>Email Address of Additional LEA Contact for Title I LEA Plan</b>
rblickendorfer@dcata.org	sfrancois@dcata.org
<b>Telephone Number of Primary LEA Contact for Title I LEA Plan</b>	<b>Telephone Number of Additional LEA Contact for Title I LEA Plan</b>
202-398-6811, ext. 5256	202-398-6811

### 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.

<b>Name of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only)</b>	<b>Signature of Individual Certifying Title I LEA Plan</b>
Kimberly A. Smith	
<b>Title of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only)</b>	<b>Date of Certification (input at the time of signature)</b>
Chairperson of the Board of Directors	9/3/13

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](mailto:CON.APP@DC.GOV).

### OSSE Use Only

Date Title I LEA Plan First Received: