**CARES ACT AFFIRMATION OF CONSULTATION WITH NON-PUBLIC SCHOOL OFFICIALS**

Sec. 18005 of the CARES Act requires a local education agency (LEA) receiving funds under sections 18002 or 18002 of the CARES Act to provide equitable services to students and teachers in non-public schools in the same manner as provided by section 1117 of the ESEA of 1965, as determined in consultation with representatives of non-public schools. Please see guidance from USED at <https://oese.ed.gov/files/2020/04/FAQs-Equitable-Services.pdf>.

The control of funds for the services and assistance provided to a non-public school under subsection (a) and title to materials, equipment, and property purchased with such funds, shall remain with the public agency. The public agency shall administer such funds, materials, equipment, and property and shall provide such services, or may contract for the provision of such services with a public or private entity. Services provided should be consistent with activities allowed by Sec. 18003 (d) (1 – 12) of the CARES Act.

This form must be completed for each non-public school regardless of consultation results. Please check the appropriate box below.

[ ]  Check if the non-public school does wish to participate in services from CARES Act funding.

[ ]  Check if the non-public school does NOT wish to participate in services from CARES Act funding.

[ ]  Check if the public LEA does not have any non-public schools located within its boundaries.

[ ]  Check if the non-public school has not responded to the public LEA’s repeated, good-faith attempts (at least 3) to consult them. Keep documentation of all attempts to consult, such as telephone logs, emails, certified mail, etc.

Please describe the equitable and effective services to be provided and what such services will entail per the agreement between the public LEA and the non-public school.

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Public LEA Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Public LEA Representative Name Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Public LEA Representative Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Public LEA Representative Email Address Phone Number

TO BE COMPLETED BY THE NON-PUBLIC SCHOOL REPRESENTATIVE:

[ ]  Do or [ ]  Do Not agree that timely and meaningful consultation occurred regarding CARES Act Funding.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Non-Public School Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Non-Public School Representative Name Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Non-Public School Representative Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Non-Public School Representative Email Address Phone Number

\*Copies of all CARES Act Consultation forms must be uploaded into Indistar in the ESSER Funds folder.