# Cover Sheet

**California Community Schools Partnership Program:   
State Technical Assistance Center**

**Request for Applications**

Please complete the following for the local educational agency (LEA) applicant and subcontractors:

**LEA:** **LEA Name**

**LEA’s County-District-School Code:** **LEA County-District-School Code**

**Primary Contact:**

**Name:** Primary Contact Name

**Title:** Primary Contact Title

**Phone:** Primary Contact Phone

**Email:** Primary Contact Email

**Secondary Contact:**

**Name:** Secondary Contact Name

**Title:** Secondary Contact Title

**Phone:** Secondary Contact Phone

**Email:** Secondary Contact Email

**List Partner Organization(s)/Subcontractors:** Partner Organization List

I support this application for a California Community Schools Partnership Program (CCSPP) State Technical Assistance Center (S-TAC) contract. I assure that the LEA or consortium of LEAs applying for the CCSPP S-TAC contract will adhere to the intent and letter of the California Community Schools Partnership Act as part of California *Education Code* Sections 8900–8902 along with the requirements and specifications identified in the Request for Applications. By signing/typing my name electronically, I agree that my electronic signature is the legal equivalent of my manual signature on this Form.

Add pages and/or signature lines as needed to ensure each LEA and Partner Organization listed above has signed this form. Sign and date below.

**LEA Name (Signature):** LEA Name (Signature)

E-Signature of LEA Superintendent or Designee

E-Signature of LEA Superintendent or Designee Date

**Subcontractor 1 Name:** Subcontractor Name 1

E-Signature of Subcontractor 1

E-Signature of Partner Organization Executive Officer or Designee Date

**Subcontractor 2 Name:** Subcontractor Name 2

E-Signature of Subcontractor 2

E-Signature of Subcontractor Executive Officer or Designee Date

**Subcontractor 3 Name:** Subcontractor Name 3

E-Signature of Subcontractor 3

E-Signature of Subcontractor Executive Officer or Designee Date

**Subcontractor 4 Name:** Subcontractor Name 4

E-Signature of Subcontractor 4

E-Signature of Subcontractor Executive Officer or Designee Date

**Subcontractor 5 Name:** Subcontractor Name 5

E-Signature of Subcontractor 5

E-Signature of Subcontractor Executive Officer or Designee Date

**Subcontractor 6 Name:** Subcontractor Name 6

E-Signature of Subcontractor 6

E-Signature of Subcontractor Executive Officer or Designee Date

Posted by: California Department of Education – October 2024