**Affirmation of Notification, Invitation and Consultation**

**for Equitable Services to Non-Profit Private Schools in North Carolina**

**Under the CARES Act – Elementary and Secondary School Emergency Relief (ESSER) Fund**

The district must notify the private schools located within its enrollment boundaries of the availability of CARES Act-ESSER equitable services and maintain, in its files, a copy of this form for each of those schools.

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| **School**: |       | **Phone:** |       |
| **Email (optional):** |       | **Contact (optional):** |       |
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| **District (where the school is located):** |       |

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| **SECTION A: The private school official checks one box.**  |
|  A-1 [ ]  THE **PRIVATE SCHOOL HEREBY AFFIRMS** that:1. the “Summary of Topics & Statement of Assurances for CARES Act Equitable Services” was provided to the private school by the district,
2. the selections made in SECTION B (below) are based on timely and meaningful consultation with the district and on verifiable enrollment and eligibility data provided by the private school,
3. the proposed design of service(s) is equitable with respect to eligible private schools and
4. consultation shall continue throughout the implementation and assessment of all accepted programs.

 **OR**A-2 [ ]  THE **PRIVATE SCHOOL HEREBY ASSERTS** that one or more of the four conditions listed above **have not been met**. Complaints or concerns regarding this process may be filed with the Equitable Services Ombudsman at NCDPI (984-236-2786). |
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| **SECTION B: The private school official may check only one of the following to indicate their choice.** |
| B-1 [ ]  | The private school hereby:1) affirms that it is a non-profit school and 2) accepts equitable services through the Elementary and Secondary School Emergency Relief funds, in accordance with the CARES Act. |
| B-2 [ ]  | The private school hereby declines equitable services offered through the Elementary and Secondary School Emergency Relief funds, in accordance with the CARES Act. |

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| **SECTION C: The private school official completes this section to affirm its selections in A & B above.** |
| Street address of the school (must be a physical location, not a PO Box): |
| Name of Private School Official (print):  | Signature of Private School Official: ⮚ | Date Signed: |

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| **SECTION D: If the private school official did not complete Sections A, B & C, the district must check box D-1. This also applies if the school may have declined to consult due to not having non-profit status.**D-1 [ ]  THE DISTRICT **HEREBY AFFIRMS** that it has documented its efforts to notify the private school of the availability of CARES Act equitable services and to invite the school to consult, but the school:  1. actively declined the invitation to consult
2. did not respond, despite two timely and direct invitations being documented by the district
3. did not consult despite accepting the invitation or
4. declined to complete Sections A, B & C despite initially engaging in consultation
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| **SECTION E: The district official’s signature is required in all cases.**  |
| Name of district Official:       | Signature of district Official: ⮚ | Date Signed:      |

**Private schools participating in consultation should be given a copy of this completed and signed form.**