



Part 1: Local Educational Agency Information

Name of Local Educational Agency	OPTIONS PUBLIC CHARTER SCHOOL
Name of LEA Executive Director (Public Charter Schools Only)	Dr. Charles Vincent
Full Address of Local Educational Agency	1375 E. STREET NW, WASHINGTON DC 20002
Main Telephone Number of Local Educational Agency	202-547-1028
Telephone Number of LEA Executive Director (Public Charter Schools Only)	202-547-1028
Name of Primary LEA Contact for Title I LEA Plan	Dr. Charles Vincent
Position Title of Primary LEA Contact for Title I LEA Plan	Executive Director
Email Address of Primary LEA Contact for Title I LEA Plan	cvincent@optionsschool.org
Telephone Number of Primary LEA Contact for Title I LEA Plan	202-547-1028
Name of Additional LEA Contact for Title I LEA Plan	Rebekah Roberts
Position Title of Additional LEA Contact for Title I LEA Plan	Grant Administrator
Email Address of Additional LEA Contact for Title I LEA Plan	rroberts@optionsschool.org
Telephone Number of Additional LEA Contact for Title I LEA Plan	443-822-4092

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)	Dr. J. C. HAYWARD
Signature of Individual Certifying Title I LEA Plan	<i>Dr. J. C. Hayward</i>
Date of Certification (Input at the time of signature)	9/16/13
Title of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only)	CHAIRPERSON OF BOARD OF DIRECTORS

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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Part 1: Local Educational Agency Information

Name of Local Educational Agency Options Public Charter School	Name of LEA Executive Director (Public Charter Schools Only) Charles Vincent
Full Address of Local Educational Agency 1375 E Street NW, Washington, DC 20002	Email Address of LEA Executive Director (Public Charter Schools Only) cvincent@optionsschool.org
Main Telephone Number of Local Educational Agency 202-547-1028	Telephone Number of LEA Executive Director (Public Charter Schools Only) 202-547-1028
Name of Primary LEA Contact for Consolidated Application Programs Charles Vincent	Name of Additional LEA Contact for Consolidated Application Programs Andrea Shorter
Position Title of Primary LEA Contact for Consolidated Application Programs Executive Director	Position Title of Additional LEA Contact for Consolidated Application Programs Accountant
Email Address of Primary LEA Contact for Consolidated Application Programs cvincent@optionsschool.org	Email Address of Additional LEA Contact for Consolidated Application Programs ashorter@acscca.net
Telephone Number of Primary LEA Contact for Consolidated Application Programs 202-547-1028	Telephone Number of Additional LEA Contact for Consolidated Application Programs 301-996-3909

Part 2: Programs for Which the LEA is Applying for Funding

Below, input the allocation, provided by the State Education Agency, for each program for which the LEA is applying for funding through this application. For Title III, Part A, the LEA is eligible to apply through this application only if the allocation is at least \$10,000. Please note that allocations are subject to change according to the applicable federal and state statutes, regulations, and policies.

LEA Allocation for Title I, Part A	LEA Allocation for Title II, Part A	LEA Allocation for Title III, Part A
\$ 319,717.87	\$ 73,657.41	

Part 3: Schedule for Submission of Reimbursement Requests

Please indicate, by checking the applicable box below, the schedule that the LEA will follow for Federal Fiscal Year 2013 (July 1, 2013 - September 30, 2015, including the "Tydings" period) for submitting reimbursement requests for all grants included in this application in order to maintain regular drawdowns of federal funds. From among these options, the LEA has the flexibility to choose a schedule that best meets its needs.

Monthly (12 workbooks per year)	Bi-Monthly (6 workbooks per year)	Quarterly (4 workbooks per year)
		X

Part 4: LEA Certification of Application

By signing below, the Applicant certifies that all of the information contained in this application is true and accurate to the best of its knowledge. Additionally, the Applicant certifies that it has read and agrees to all additional assurances and certifications included in Phase II of the application.

Name of Individual Certifying Phase II Application (Board Chairperson or Chancellor only)	Signature of Individual Certifying Phase II Application
Title of Individual Certifying Phase II Application (Board Chairperson or Chancellor only) Chairperson of the Board of Directors	Date of Certification (input at the time of signature) 9/16/13

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Date Phase II Application First Received:	
Date Phase II Application Approved (first date for reimbursement):	