



Intent to Plan a Title I Schoolwide Program

Please complete this form for each school that intends to plan a Title I Schoolwide Program. Return completed form to Pennsylvania Department of Education via email attachment to Sheri Graves | Division of Federal Programs at: shegraves@pa.gov

For additional information, contact Maria Garcia at: mariagarci@pa.gov

District/Charter:

Date:

List School Year Intending to Implement Schoolwide Program:

Complete Mailing Address:

Title I Director:

Phone #:

Fax #:

Email:

Title I Director Signature: _____

School Information

School Building:

Grade Levels:

Enrollment:

Complete Mailing Address:

Percent Low Income:

as determined by: Free/Reduced Price Lunches: or Other:

Principal: _____

Phone #:

Fax #:

Email:

Principal Signature: _____

Narrative not required

This school is over 40% Free/Reduced

Narrative Required

This school is less than 40% Free/Reduced (**Next Page**)

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Only Schools that have less than 40% Free and Reduced need to complete this narrative:

Outline how a Schoolwide Program would best serve the needs of students in your school and how it will improve academic achievement and/or other factors (may include additional pages if necessary).