

LOCAL EDUCATIONAL AGENCY PROGRAM IMPROVEMENT PLAN
ASSURANCE PAGE

Local Educational Agency (LEA) Plan Information:

Name of LEA: Norton Space & Aeronautics Academy

County District Code: 36-10363-0115808

Date of Local Governing Board Approval: 06-08-2009

District Superintendent: Gordon Soholt, Chief Academic Officer

Address: 17500 Mana Road

City: Apple Valley

Zip Code: 92307

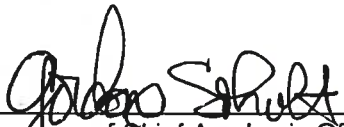
Phone: 760-946-5414 ext. 215


FAX: 760-946-9193


E-mail: gsoholt@lcer.org

Signatures:

On behalf of LEAs, participants included in the preparation of this Program Improvement LEA Plan Addendum:

	Gordon Soholt	1/14/13
Signature of Chief Academic Officer	Printed Name of Chief Academic Officer	Date

	Jeff Lewis	1/16/13
Signature of Board President	Printed Name of Board President	Date

	Cheryl Dale	1/16/13
Signature of Title III English Learner Coordinator/Director	Printed Name of Title III English Learner Coordinator/Director	Date

Please note that the Title III English Learner Coordinator/Director will only need to sign this Assurance if the LEA is identified for Title III Year 2 or Year 4 improvement status.

By submission of the local board approved LEA Plan Addendum (in lieu of the original signature assurance page in hard copy), the LEA certifies that the plan has been locally adopted and original signed copies of the assurances are on file in the LEA. The certification reads:

Certification: I hereby certify that all of the applicable state and federal rules and regulations will be observed by this LEA and that, to the best of my knowledge, information contained in this Plan is correct and complete. Legal assurances for all programs are accepted as the basic legal condition for the operation of selected projects and programs and copies of assurances are retained onsite. I certify that we accept all general and program specific assurances for Titles I, II, and/or III as appropriate, except for those for which a waiver has been obtained. A copy of all waivers will remain on file. I certify that actual ink signatures for this LEA Plan/Plan Addendum/Action Plan are on file, including signatures of any required external providers.