

STATE OF LOUISIANA **DEPARTMENT OF EDUCATION**

POST OFFICE BOX 94064, BATON ROUGE, LOUISIANA 70804-9064

Toll Free #: 1-877-453-2721 http://www.louisianaschools.net

APPLICATION FOR PROJECT FUNDS

Official Program Title:	Louisiana Striving Readers Comprehensive Literacy Program		
CFDA#: (If Federal Funds)	84.371C		
Awarding Agency:	U. S. Department	of Education	
Internal Program Title:	Striving Readers	Comprehensive Literacy Program	
Project Number:	28-12-SO-		
Funding Amount Applied for:			
Funding Period:	June 18, 2013 –	September 30, 2013	
A T C			
Agency Information:			
Recipient Organization:			
Project Director:			
Fiscal Agent:			
Mailing Address:			
Street Address:			
City:	State:	Zip Code:	
Program Contact Information:			
Name/Position:			
Telephone Number:			
(Area Code) (Number) (Extension)			
Fax Number:	(Area Code) (Nu	mhor)	
	(Area Coue) (Ne	imber)	
Email Address:			
I hereby assure and certify that this agency will comply with the regulations, policies, guidelines and requirements, as they relate to the application, acceptance and use of funds for the federally assisted or state assisted project.		APPROVED (For State Agency Use Only):	
receiany assisted of state assisted pre	yeeu	Program Division Director/Designee	Date
Approved Representative of the Applicant A	gency Date	Division of Education Finance /Designee	Date