# Sample Intent to Participate Form

(Complete a separate form for each facility.)

## Sample City/County Public Schools

### *ESSA* Program Intent to Participate in Neglected and/or Delinquent Programs

#### School Year

Services for neglected, delinquent, or at-risk youth include providing educational opportunities to meet the same challenging State academic standards that all children in the State are expected to meet; providing services to make a successful transition from institutionalization to further schooling or employment; and preventing at-risk youth from dropping out of school. Based on your facility type, your facility is eligible to receive services either under the Title I, Part A, Neglected Set-aside or under Title I, Part D, Subpart 2.

A **neglected facility** is a public or private residential facility, other than a foster home, that is operated for the care of children who have been committed to the institution or voluntarily placed in the institution under applicable State law, due to abandonment, neglect, or death of their parents or guardians.

A **delinquent facility** is a public or private residential facility for the care of children who have been adjudicated to be delinquent or in need of supervision. (Section 1432 (4)(a)(b))

**Note**: This is not an official U.S. Department of Education or Virginia Department of Education document. The form is for sample purposes only and should not be considered as a required document when administering *ESSA* programs.

Sample City/County Public Schools

***ESSA* Program Intent to Participate in Neglected and/or Delinquent Programs**

***School Year***

Facility Name:

Address:

Circle/highlight the facility type: neglected delinquent

If neither of these definitions describe your facility, please provide a description below:

***The facility must be designated as either a neglected or a delinquent institution. (It cannot be both).***

Please indicate if your residential facility intends to participate in services for neglected or delinquent students.

**Title I, Part A - *Neglected Set-aside***

Services are provided to local neglected facilities out of Title I, Part A, funds.

Intend to Participate? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_ NA \_\_\_\_\_\_\_\_\_\_\_\_

**Title I, Part D – *Neglected, Delinquent or At-Risk Students***

Services are provided to local delinquent facilities out of Title I, Part D, Subpart 2 funds.

Intend to Participate? Yes \_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_ NA \_\_\_\_\_\_\_\_\_\_\_\_

What is the student enrollment in your facility for the current school year?

Where do the students receive educational services? (circle one)

In the facility \_\_\_\_\_\_In a local school\_\_\_\_\_\_

Institution Administrator Name and Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrator’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mail, fax, or email this completed document to:

If you have questions, please contact *name* at *phone* #.

**This form must be returned by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**