

Private Nonprofit Equitable Services Elementary and Secondary School Emergency Relief (ESSER) Grant 2020-2021 Intent to Participate

School:

School:		Telephone:
Address:		Principal:
City & Zip:		Email:
*Will your		
school	Program Description	
participate?		
	ESSER- Authorized	d by Coronavirus Aid, Relief, and Economic Security (CARES) Act, Section 18003
☐ YES		If you checked "YES," please complete the following:
		Private School Contact Person:
□ NO	Name:	
	Phone:	
	Email:	
=	r participation, you mu	listrict of your intent to participate in the program(s) checked "YES." To fulfill the ast complete additional information that will be sent to you from each of the Title
Principal Signa Return the forr		nesday, June 24, 2020 via U.S. Mail or email delivery to: Xochitl Salazar, Federal
rograms, 310	S. Cherry St., Tombal	ll, TX 77375.

If you have any questions or need additional information regarding a specific program, call or email Xochitl Salazar at 281-357-3100 ex 2036 or xochitlsalazar@tomballisd.net.