Principals
Non-Public School Name
Street Address
City, State Zip Code

Dear Principal,

The No Child Left Behind Act requires the equitable participation of private school students and teachers in a number of federal education programs. Pursuant to that requirement, we request a meeting with you to discuss your participation in Federal Title programs. Your students may be eligible for federal education services under Title I, Part A or any of several other federal programs listed below. Services can range from funds for software purchases to professional development for staff to participation in the extended-year summer school program.

<table>
<thead>
<tr>
<th>TITLE OF PROGRAM</th>
<th>PROGRAM NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title I, Part A</td>
<td>Improving Basic Programs Operated by Local Educational Agencies</td>
</tr>
<tr>
<td>Title II, Part A</td>
<td>Teacher and Principal Training and Recruitment Fund</td>
</tr>
<tr>
<td>Title II, Part D</td>
<td>Enhancing Education through Technology</td>
</tr>
<tr>
<td>Title III, Part A</td>
<td>Language Acquisition, Language Enhancement, and Academic Achievement Act (Targets students who are English Language Learners)</td>
</tr>
<tr>
<td>Title IV, Part A</td>
<td>Safe and Drug-Free Schools and Communities (including set-aside funding for the Governor)</td>
</tr>
</tbody>
</table>

If you are interested in learning more about the Title programs that your eligible students and/or teachers could receive in the coming year, please return the enclosed form no later than (Insert Date). You can return the form by FAX to (Insert Fax Number) or mail to the address above. Upon receipt of the form, we will contact you to set up a consultation meeting.

We hope that you will choose to learn about Title services for your students, teachers, and families. In the meantime, if you have any questions, please contact me at (Insert Telephone Number) or e-mail at (Insert Email Address). I look forward to meeting you soon.

Sincerely,

Superintendent
School District
Private School Officials Interested in Their Students Participating in Title Programs

Name of Private School __________________________________________________
Name of Private School Official _________________________________________
Private School Contact (if other than above) ______________________________
E-mail of Contact ______________________________________________________
Phone number of Contact __________ FAX ______________________________

Please check the appropriate response.

Title I

____ Yes, I am interested in my students, teachers, and families participating in Title I programs for the 2009-2010 school year.
____ No, I am NOT interested in my students, teachers, and families participating in Title I programs for the 2009-2010 school year.

Title II

____ Yes, I am interested in my students, teachers, and families participating in Title II programs for the 2009-2010 school year.
____ No, I am NOT interested in my students, teachers, and families participating in Title II programs for the 2009-2010 school year.

Title III

____ Yes, I am interested in my students, teachers, and families participating in Title III programs for the 2009-2010 school year.
____ No, I am NOT interested in my students, teachers, and families participating in Title III programs for the 2009-2010 school year.

Title IV

____ Yes, I am interested in my students, teachers, and families participating in Title IV programs for the 2009-2010 school year.
____ No, I am NOT interested in my students, teachers, and families participating in Title IV programs for the 2009-2010 school year.

Please return this form by (Insert Date) to:
Superintendent
Street Address
City, State Zip Code
E-Mail: (Insert Email Address) Phone: (Insert Telephone #) FAX: (Insert Fax #)