

**PRIVATE NONPROFIT SCHOOLS
2024-2025 INTENT TO PARTICIPATE – TITLE III, PART A FEDERAL ESEA
PROGRAM**

School: _____ Telephone: (____) ____-_____
 Address: _____ Principal: _____
 City, State, Zip: _____, _____, _____ Email: _____

*Will your school participate?	Program Description	District Contact Person
<input type="checkbox"/> Yes <input type="checkbox"/> No	Title III, Part A – Provides supplemental resources to ensure that children who are Emergent Bilingual students attain English proficiency.	Dr. Randal Jones 713-556-6961 rjones3@houstonisd.org
	If you have checked 'Yes,' please complete the following: Title III, Part A, Private School Contact Person: Name: _____ Phone: _____ Email: _____	

*Will your school participate?	Program Description	District Contact Person
<input type="checkbox"/> Yes <input type="checkbox"/> No	Title III, Part A – Provides supplemental resources to ensure that children who are recent Immigrants attain English proficiency. Immigrants must be: <ul style="list-style-type: none"> • age 3 through 21 • not born in any state and • not been attending one or more schools in any one or more states for more than 3 full academic years. 	Dr. Randal Jones 713-556-6961 rjones3@houstonisd.org
	If you have checked 'Yes,' please complete the following: Title III, Part A, Private School Contact Person: Name: _____ Phone: _____ Email: _____	

**Submission of this form notifies the district of your intent to participate in the program(s) checked 'Yes.' To fulfill the requirements for participation, you will need to complete additional information that will be sent to you by the district contact person.*

Principal's Signature: _____
 (Entering your name here constitutes a binding digital signature.)

Email form no later than **Friday, February 16, 2024** to:

Dr. Randal Jones (rjones3@houstonisd.org)
 Multilingual Programs Department | Houston ISD
 4400 W. 18th Street
 Houston, Texas 77092