

Garrett County Board of Education
Title I Supplemental Educational Service Option

The form will be completed in the school office by the parent and submitted to the school principal for processing.

I want to apply for my child(ren) to receive Title I Supplemental Educational Services for the 2004-2005 school year. I understand that in order to be eligible for these services, my child(ren) must be eligible for the federal free and/or reduced meal program. Additionally, I understand that I am responsible for providing my child(ren)'s transportation to the Supplemental Educational Services provider.

Parent Signature _____

Date _____

Parent's Name _____

Address _____

Home Telephone Number _____ Work Telephone Number _____

Names of Child(ren)

Grade Assignment

OFFICE USE ONLY

Date Received _____ School Name _____

Principal's Signature _____

Date Received in Director of Elementary Education's Office _____

Secretary's Signature _____