CARES Act Subgrantee Fiscal Waiver Request Form
Nita M. Lowey 21st Century Community Learning Centers

Pursuant to ESEA 4205(j) of the Elementary and Secondary Education Act of 1965, as amended, and §3511 of Division A of the Coronavirus Aid, Relief, and Economic Security (CARES) Act, the District of Columbia Office of the State Superintendent of Education (OSSE) is issuing this document to 21st Century Community Learning Centers (21st CCLC) subgrantees in their final year of their subgrant to request a one-year grant extension. Please submit completed forms to OSSE.Cares@dc.gov.

○　　We request an extension of our 21st CCLC subgrant expiring on Sept. 30, 2020. This extension will extend the period of availability of the federally funded portion of our grant through Sept. 30, 2021.

I am requesting this extension because it is not possible to obligate funds on a timely basis as originally planned, due to extensive closures in the District of Columbia. These closures are in response to extraordinary circumstances for which a national emergency has been duly declared by the President of the United States under the Robert T. Stafford Disaster Relief and Emergency Assistance Act and will protect the health and safety of students, staff, and our communities.

In seeking this extension, I assure that:

○　　We will use funds under the respective program(s) in accordance with the provisions of all applicable statutes, regulations, program plans, and applications.

○　　We will work to mitigate any negative effects, if any, that may occur as a result of the requested extension.

Before granting any extension, OSSE will review a subgrantee's compliance with the grant terms, conditions and performance in meeting program goals and objectives.

By typing my name and signing below, I am affirming submission of this waiver on behalf of my LEA or organization.

_____

Head of School or Organization (or Authorized Representative) Name, Printed

_____

Head of School or Organization (or Authorized Representative) Signature

Contact Phone　　　　　　　　　　　Contact Email

LEA or Organization Name　　　　　　　　　Date