

**Affirmation of Notification, Invitation and Consultation  
for Equitable Services to Non-Profit Private Schools in North Carolina  
Under the CARES Act – Elementary and Secondary School Emergency Relief (ESSER) Fund**

The district must notify the private schools located within its enrollment boundaries of the availability of CARES Act-ESSER equitable services and maintain, in its files, a copy of this form for each of those schools.

<b>School:</b>		<b>Phone:</b>	
<b>Email (optional):</b>		<b>Contact (optional):</b>	

<b>District (where the school is located):</b>	
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**SECTION A: The private school official checks one box.**

A-1  **THE PRIVATE SCHOOL HEREBY AFFIRMS** that:

- a. the “Summary of Topics & Statement of Assurances for CARES Act Equitable Services” was provided to the private school by the district,
- b. the selections made in SECTION B (below) are based on timely and meaningful consultation with the district and on verifiable enrollment and eligibility data provided by the private school,
- c. the proposed design of service(s) is equitable with respect to eligible private schools and
- d. consultation shall continue throughout the implementation and assessment of all accepted programs.

**OR**

A-2  **THE PRIVATE SCHOOL HEREBY ASSERTS** that one or more of the four conditions listed above **have not been met**. Complaints or concerns regarding this process may be filed with the Equitable Services Ombudsman at NCDPI (984-236-2786).

**SECTION B: The private school official may check only one of the following to indicate their choice.**

B-1  The private school hereby:

- 1) affirms that it is a non-profit school and
- 2) accepts equitable services through the Elementary and Secondary School Emergency Relief funds, in accordance with the CARES Act.

B-2  The private school hereby declines equitable services offered through the Elementary and Secondary School Emergency Relief funds, in accordance with the CARES Act.

**SECTION C: The private school official completes this section to affirm its selections in A & B above.**

Street address of the school (must be a physical location, not a PO Box):

Name of Private School Official (print):	Signature of Private School Official: ➤	Date Signed:
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**SECTION D: If the private school official did not complete Sections A, B & C, the district must check box D-1. This also applies if the school may have declined to consult due to not having non-profit status.**

D-1  **THE DISTRICT HEREBY AFFIRMS** that it has documented its efforts to notify the private school of the availability of CARES Act equitable services and to invite the school to consult, but the school:

- a. actively declined the invitation to consult
- b. did not respond, despite two timely and direct invitations being documented by the district
- c. did not consult despite accepting the invitation or
- d. declined to complete Sections A, B & C despite initially engaging in consultation

**SECTION E: The district official's signature is required in all cases.**

Name of district Official:	Signature of district Official: ➤	Date Signed:
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**Private schools participating in consultation should be given a copy of this completed and signed form.**