

2019-2020 McKinney-Vento Education for Homeless Children and Youth
Grant Application

**Mississippi Department of Education
COVER SHEET (Form 1)**

District Name, District Code and DUNS #	
Federal Programs Director Name / Email	
Homeless Liaison Name / Email	
Superintendent Name / Email	
District Address	
Contact Number	
Projected Allocation	Final Allocation (MDE use only)
\$50,000	

By signing below, I am verifying that I have **read** and **agree** to comply with the US Department of Education Grant and Other Federal Assurances and Mississippi Department of Education Standard Terms and Conditions. I certify that the contents of this proposal, if funded, will be followed in the implementation of the school district's Education for Homeless Children and Youth Program described herein.

All signatures are required.

Federal Programs Director _____

Homeless Liaison _____

Business Manager _____

Superintendent _____

For MDE use only:

State Homeless Coordinator _____

Office/Division Director _____

Federal Programs Grant Manager _____

Executive Director _____

Date of Approval _____