

Partner Attestation

(this page to be completed by *each* partner and submitted to the Partnership Lead Contact)

Partner	Recovery School District
Perkins Coordinator	Jill Zimmerman

Cluster Choice

Indicate the career-technical education course (secondary) or programs (postsecondary) that will be targeted by the partner in each of the clusters (*add Clusters in heading section*) selected by the partnership: (*add rows as needed*)

Cluster 1-Skilled Crafts	Cluster 2-STEM	Cluster 3-Information Technology
Journey to Careers	Journey to Careers	Journey to Careers
CTE Internship I & II	CTE Internship I & II	CTE Internship I & II
NCCER Core	Nurse Assistant	CIW Database Design
NCCER Welding Technology I & II	Emergency Medical Technician Basic	CIW E-Commerce Site Design & Development
NCCER Carpentry I & II	First Responder	CIW Essentials of Web Design
NCCER Electrical I & II	Patient Care Technician	CIW Internet Business
NCCER Industrial Maintenance		CIW Introduction to JAVA Script
NCCER HVAC I & II		CIW Network Security
NCCER Plumbing		CIW Networking Technology
NCCER Pipefitter I & II		CIW Perl Fundamentals
		CompTIA+ Fundamentals of Computer Installation and Configuration
		CompTIA+ Networking Fundamentals
		CompTIA+ Programming with PL/SQL
		Web Design I & II

Administration of Resources

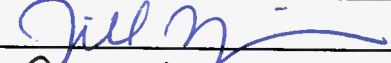

Provide the partner's Perkins Basic Grant award for FY16 and indicate budget plans for FY16 with an X in all applicable activity categories:

Award Amount \$	700 301,429
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Activity	Personnel	Travel	Equipment	Supplies	Other
Administration					X
Professional Development					X
Upgrade of Technical Programs (labs, shops, etc.)					X
Supplies for Student Instruction					X
Dual Enrollment					X
Career Coaching					X
Instructional Services					X
Other:					X

By signing in the indicated area below, the partner is agreeing with the designation of the lead partner for the partner's Social, Economic, Geographic Area of Service Partnership, and that the information above had been determined in collaboration with all Social, Economic, Geographic Area of Service partners.

Attestation Signatures

Title	Printed Name	Signature	Date
Perkins Coordinator	Jill Zimmerman		5/16/15
Signature of Authority	Laura Hawkins		6/12/15