

Title I, Part A Carryover Waiver Request

2025-2026

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| General Information |
| District Name and LEA No.Click here to enter text. | District Mailing AddressClick here to enter text. |
| Superintendent Name:Click here to enter text. | Federal Program Coordinator: Click here to enter text. |
| Superintendent Email Address: Click here to enter text. | Federal Program Coordinator Email Address: Click here to enter text. |
| Superintendent Telephone, Area Code/ No.Click here to enter text. | Federal Program Coordinator Telephone, Area Code/ No.Click here to enter text. |
| Superintendent Fax No. Click here to enter text. | Federal Program Coordinator Fax No. Click here to enter text. |
| WAIVER INFORMATION |
| Has your district requested a waiver in previous years?[ ]  YES[ ]  NOIf YES, what year did your district request a waiver? *Enter the year the waiver was requested below.*Click here to enter text. |
| CARRYOVER INFORMATION |
| What is the amount your district is requesting to carryover? *Enter the amount your district is requesting to carryover below.*Click here to enter text. |
| Does this amount exceed the 15% carryover?[ ]  YES *How much does this exceed the 15% carryover?*Click here to enter text.[ ]  NO |
| Explain why the district is applying for the waiver.Click here to enter text. |
| Superintendent’s Signature (or Authorized Representative) Date |
| To Be Completed by ADE Personnel |
| Waiver Request Approved: [ ]  Yes [ ]  No | Approved by:Click here to enter text. |



Attention ADE DESE Federal Finance:

 School District/ Charter School is carrying over more than 15% of its **TOTAL 2024-2025 SY ESEA Title I funds** and would like to request a waiver of the 15% limitation.

[ ]  *School District / Charter School* ***has NOT*** *applied for a waiver in the previous school years to exceed the 15% carryover.*

[ ]  *School District / Charter School* ***has*** *applied for a waiver in the previous school years to exceed the 15% carryover during the school year.*

 School District’s/ Charter School’s total carryover amount exceeds 15%. The LEA understands that any carryover must be added to the following year’s budget and must be spent only for the designated purposes.

Please waive School District’s / Charter School’s carryover limitation for the 2024-2025 school year to allow Title I, Part A funds in excess of 15% to be carried over into the 2025-2026 school year.

Superintendent’s Signature (or Authorized Representative)

LEA Number

Date