

**CAREER SUCCESS PILOT PROGRAM DATA REPORTING DOCUMENT**

**SIGNATURE PAGE**

**2017-18**

**DISTRICT NAME: ­­­­­­­­­­­­­­­­­­­­­­­­­­**

**DISTRICT CODE:**

By signing below, I attest that all information reported by this district in the 2017-18 Career Success Pilot Program Data Reporting Document is correct and in compliance with the law and guidelines set forth for the Career Success Pilot Program. Our district/charter school will collect and maintain appropriate documentation for each reported student to show that the qualified program meets funding requirements. These documents may be requested by the Colorado Department of Education as verification of student eligibility and/or confirmation of regulatory compliance.

**District/Charter School eligible signatory:**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Submit to CDE via Syncplicity by June 30, 2018.*