

# ADERSON BOARD OF EDUCATION

DAAC-E

## INVESTIGATION REPORT ON THE ADMINISTRATION OF ESEA TITLE I PROGRAM ACTIVITIES

### 1. Complainant

C. Date complaint filed

A. Name and Title

B. Address (include ZIP code)

D. Description of alleged violation(s)

E. From the list below, identify (check) the areas in which the complainant indicates violations of Title I regulations

§ A. Selection of attendance areas

§ G. Services provided private school children

§ K. Coordination of resources with other programs

§ B. Needs assessment

§ H. Evaluation of Title I projects

§ L. Dissemination of public information on Title I programs

§ C. Selection of Title I participants

§ I. Services to children living in institutions for neglected or delinquent children

§ M. Reporting requirements

§ D. General aid

§ J. Effect of Title I program on cultural or racial isolation

§ N. Comparability

§ E. Supplanting state and local funds

§ O. Other (specify)

§ F. Involvement of parents

FOR EACH AREA CHECKED, PROVIDE A DETAILED STATEMENT OF THE ESSENTIAL FACTS CONCERNING THE NATURE AND EXTENT OF THE VIOLATIONS. (If necessary, continue on attachments.)

Signature of Complainant

### 2. School District

C. Total LEA Title I allocation

D. Fiscal Year

A. Name

B. Address (include ZIP code)

E. Name of Title I project coordinator at school district

F. Superintendent of school district

G. Population of school district

### 3. Review Team

B. Date of Investigation (beginning and ending)

A. Name and address of local officials conducting this investigation

BEGINNING

Mo.

Day

Year

ENDING

Mo.

Day

Year

C. Identify all Title I documents reviewed (i.e., application proposal, evaluation reports, parental council records, fiscal control and accounting records, financial and audit reports, etc.)

D. Indicate action taken to insure proper resolution of the complaint and of any deficiencies noted during the investigation (if necessary, continue on attachments)

E. Describe corrective action, if any (if necessary, continue on attachments)

Type or print name of superintendent

Signature of superintendent

Date Signed

Name of person who prepared this report

Area Code

Telephone  
Number

Extension

Date Prepared