[insert organization/partner name or letterhead]

**Statement of Assurance**

**From:** [insert Lead LEA name and name of accountable party for the entire project w/ contact info]

**To:** [insert Partner Agency name and name of accountable party for the Partner Agency w/ contact info]

**RE:** Statement of Assurance and Supporting Documentation

**Assurances:**

A duly authorized representative for the Lead LEA should review all assurances, certifications, and terms and conditions to be familiar with the grant expectations. Please upload the Assurance Agreement form into NOVA attesting that this Pathway/Program Work Plan is:

* In compliance with K12 SWP legislation (Education Code, Section 88827 – 88828(c)(8)(C)):
	+ All partners will report outcomes and financials in the NOVA and Cal-PASS Plus Systems.
* Aligned with your district(s)/partner district(s) 2023-24 Local Control and Accountability Plan.
* Informed by, aligned with, and expands upon your region’s Regional Plan and planning efforts occurring through the Strong Workforce Program.
* Informed by Labor Market Information and regional priorities.
* Staffed by skilled teachers or faculty and provides professional development opportunities for those teachers or faculty members.

Please attest to the assurances that the Lead LEA and Partners will:

* Report data that can be used by policymakers, LEAs, community college districts, and their regional partners to support and evaluate the program, including, to the extent possible, demographic data used to evaluate progress in closing equity gaps in program access and completion, and earnings of underserved demographic groups.

|  |  |
| --- | --- |
| Signature: |  |
| Date: |  |

Lead LEA
[Insert Name of District]

|  |  |
| --- | --- |
| Signature: |  |
| Date: |  |

Partner LEA
[Insert Name of District]