

## Lead LEA/Fiscal Agent - Memorandum of Understanding (MOU) for Migrant Ed. Basic Consortium Grant

The superintendent or designee of the local educational agency (LEA) listed on this document agrees to form and participate in a Title I-C consortium of LEAs for the purpose of providing supplemental programs and services to eligible migratory children and youth. By affixing signatures to these forms, the superintendent or designee certifies the following: (1) the LEA will abide by all the statutory requirements of Title I-C, and (2) the LEA will adhere to the legal assurances contained in the Title I-C Assurances.

### Lead LEA/Fiscal Agent of Consortium

Lead Fiscal Agent: \_\_\_\_\_ LEA CTDS: \_\_\_\_\_

***Print name of administrator/contact person for the Lead LEA/Fiscal Agent:***

Administrator/Contact: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

I certify that, to the best of my knowledge, the information contained in this form is complete and accurate.

\_\_\_\_\_  
Printed Name of Superintendent or Designee

\_\_\_\_\_  
Signature of Superintendent or Designee

\_\_\_\_\_  
Date

### List of Participating LEAs

The following LEAs are applying to participate in this consortium. Each participating member must complete the required ***Participating LEA Member – Certification and Assurances*** documents.

Name of LEA	LEA CTDS	Initial Allocation	Final Allocation
Lead LEA/Fiscal Agent:			
Member 1.			
Member 2.			
Member 3.			
Member 4.			
Member 5.			
Member 6.			
Member 7.			
Member 8.			
Member 9.			
Member 10.			
Member 11.			
Member 12.			
<b>Total grant:</b>			

**Note:** Add an additional sheet if needed.

(Name of Consortium)

**Memorandum of Understanding**

(FY20\_\_\_\_ - 20\_\_\_\_)

This Memorandum of Understanding represents the agreed-upon program, services, and products to be provided to eligible migratory children and youth in the \_\_\_\_\_ (members) during the \_\_\_\_\_ project year. The \_\_\_\_\_ will act as the Lead Local Education Agency (LEA)/Fiscal Agent of the consortium. A consortium of districts receiving a Title I-C subgrant must meet the same requirements as districts or charters receiving subgrants individually.

The \_\_\_\_\_ will plan to expend all Title I-C funds during the \_\_\_\_\_ project year. As the fiscal agent, the \_\_\_\_\_ will be responsible for submitting the Migrant Ed. Basic Consortium Funding Application, and any necessary application revisions on behalf of its members.

1. ensure that consortium members fulfill their fiscal and programmatic responsibilities as subgrantees, under Title I-C,
2. maintain separate financial records for its members,
3. communicate to all members any information from the Arizona Department of Education (ADE) relevant to the fiscal application and programmatic requirements of the funds,
4. submit timely and regular requests for reimbursement and disburse the funds throughout the project period
5. submit the Migrant Ed. Basic Consortium Completion Report, which includes final expenditures and the required documentation *MEP CONSORTIUM - INDIVIDUAL LEA MEMBER DETAILS*,
6. coordinate regular meetings, as needed, for the purpose of assessing the needs of the Consortium, and
7. comply with any other requests for information from Arizona Department of Education (ADE).

As noted in the Memorandum of Understanding, each participating LEA member will create and submit a unique plan to the fiscal agent for spending the full amount of its individual Title I-C budget (current year allocation). The Lead LEA/Fiscal Agent will keep all separate budget plans on file and disseminate the appropriate funds to each member. The grant application will separately identify each LEA member's budget. The Migrant Ed. Basic Consortium Completion Reports shall also reflect this agreement.

Signatures below of the Lead LEA/Fiscal Agent Representatives represent that the consortium has met, conferred, and that all member LEAs are in agreement to all stated in this Memorandum of Understanding.

\_\_\_\_\_  
Name of Consortium Lead LEA/Fiscal Agent Representative  
(Superintendent or Designee)

\_\_\_\_\_  
Title of Consortium Lead/Fiscal Agent Representative

\_\_\_\_\_  
Signature of Consortium Lead LEA/Fiscal Agent Representative

*The Lead LEA/Fiscal Agent is responsible for uploading completed documents to the **Related Required Documents** section of the Migrant Ed. Basic Consortium funding application. For assistance, please contact:*

**ADE Migrant Education Program Team**  
MEPInbox@azed.gov