

TENNESSEE ALLIANCE FOR

CHILDREN AND FAMILIES Percentage Time Worked Certificate

2 International Plaza Drive, Suite 605 **Education Services Coordinators:**

Nashville, TN 37217 Chasity Scott – cscott@tnchildren.org

(615) 366-7175 Jennifer Pitt - jpitt@tnchildren.org

 Teresa Moore - tmoore@tnchildren.org

**TITLE 1 ASSURANCE FORM**

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ assure that I will be devoting \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%**

 **Print first and last name**

**of my work time to allowable activities under the Title I funds derived from the No Child Left Behind**

**Act of 2001 while operating as the\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at**

 **Position/Title**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ between October 31, 2014 - March 31, 2015.**

 **Agency’s name**

**Below is a list of the Title I related job duties/responsibilities that I have been assigned:**

**(or attach job description)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Staff Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Supervisor Signature Date**