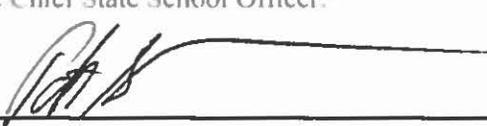


APPLICATION COVER SHEET
SCHOOL IMPROVEMENT GRANTS

<p>Legal Name of Applicant: Department of Education State of New Jersey</p>	<p>Applicant's Mailing Address: 100 Riverview Plaza Trenton, NJ 08625</p>
<p>State Contact for the School Improvement Grant</p> <p>Name: Katherine Gallagher</p> <p>Position and Office: Director, School Improvement Grants</p> <p>Contact's Mailing Address: 100 Riverview Plaza Trenton, NJ 08625</p> <p>Telephone: (609) 292-6874</p> <p>Fax:</p> <p>Email address: katherine.gallagher@doe.state.nj.us</p>	
<p>Chief State School Officer (Printed Name): David C. Hespe Peter Shulman, Acting</p>	<p>Telephone: (609) 292-0193</p>
<p>Signature of the Chief State School Officer: X </p>	<p>Date: 5/26/16</p>
<p>The State, through its authorized representative, agrees to comply with all requirements applicable to the School Improvement Grants program, including the assurances contained herein and the conditions that apply to any waivers that the State receives through this application.</p>	