

Letter of Intent – Request for Application  
FY 2019-20 Pennsylvania Pre-K Counts Program

The Pennsylvania Department of Education (PDE) is seeking applicants for Pennsylvania Pre-K Counts. Pennsylvania Pre-K Counts was enacted into law by Act 45 of 2007 (and amended in 2008 and 2010) amending the Public School Code of 1949 (24 P.S. §§ 15- 1511-D—15-1516-D). Pennsylvania Pre-K Counts provides children with the opportunity to experience a high-quality pre-kindergarten program. The program standards ensure a high return on investment in the preparation of young children for school and will help close the achievement gap. Early education through Pennsylvania Pre-K Counts can open the doors of opportunity for every child to do well in school, in the workforce, and in life.

PDE is issuing this Request for Applications now in order to support providers in preparing to serve additional children and being ready for enrollment by September. We recognize that providers need to conduct outreach to families; recruit, hire and train staff; and do all of the planning necessary to successfully implement the program pending approval of proposed funding.

To whom it may concern:

On behalf of \_\_\_\_\_ we intend to apply for  
*Lead Agency*

funds to support (check all that apply and complete the identified information):

We intend to serve: \_\_\_\_\_  
# of children: full-day programming

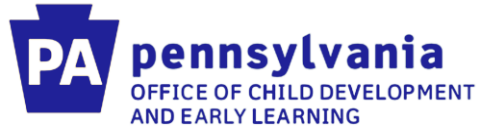
We intend to serve: \_\_\_\_\_  
# of children: half-day programming

We intend to serve children in the following counties:

\_\_\_\_\_

Our organization is a (check all that apply):

- School district
- STAR 3 or 4 child care provider



PDE Private Licensed Nursery School

Head Start

Third party entity

Name any partner organizations you intend to include in the application:

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\*\* Information submitted in the Letter of Intent may be modified in the final application with the exception of "lead agency" and AUN.

Lead Agency Name: \_\_\_\_\_ Date: \_\_\_\_\_  
AUN #: \_\_\_\_\_

Please list the name of the person that should be given access to complete the grant application within the eGrants system (This person should be authorized by your organization to write the grant application).

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Email Address: \_\_\_\_\_

If the above person is an existing eGrants user please list their current eGrants user ID:

Chief Authorized Official (CAO): \_\_\_\_\_  
CAO Signature: \_\_\_\_\_