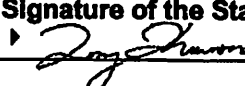



# Grant Award Notification

<b>GRANTEE NAME AND ADDRESS</b> Stanley Rose, Superintendent Santa Clara Unified PO Box 397 Santa Clara, CA 95052-0397				<b>CDE GRANT NUMBER</b>			
				<b>FY</b>	<b>PCA</b>	<b>Vendor Number</b>	<b>Suffix</b>
				18	25437	69674	00
<b>Attention</b> Stanley Rose				<b>STANDARDIZED ACCOUNT CODE STRUCTURE</b>			<b>COUNTY</b>
<b>Program Office</b> Office of Superintendent				<b>Resource Code</b>		<b>Revenue Object Code</b>	43
<b>Telephone</b> 408-423-2000				6387		8590	<b>INDEX</b>
<b>Name of Grant Program</b> Career Technical Education Incentive Grant							0615
<b>GRANT DETAILS</b>	<b>Original/Prior Amendments</b>	<b>Amendment Amount</b>	<b>Total</b>	<b>Amend. No.</b>	<b>Award Starting Date</b>	<b>Award Ending Date</b>	
	\$372,380.52	0	\$372,380.52	0	July 1, 2018	December 31, 2020	
<b>CFDA Number</b>	<b>Federal Grant Number</b>	<b>Federal Grant Name</b>			<b>Federal Agency</b>		
N/A	N/A	N/A			N/A		
<p>I am pleased to inform you that you have been funded for the Career Technical Education Incentive Grant.</p> <p>This award is made contingent upon the availability of funds. If the Legislature takes action to reduce or defer the funding upon which this award is based, then this award will be amended accordingly.</p> <p>Please return the original, signed Grant Award Notification (AO-400) to:</p> <p style="text-align: center;">Sarah Chambers, Associate Governmental Program Analyst  Career Technical Education Leadership Support Office  California Department of Education  1430 N Street, Room Suite 4202  Sacramento, CA 95814-5901</p>							
<b>California Department of Education Contact</b> R. Mary Gallet, Ph.D.				<b>Job Title</b> Education Programs Consultant			
<b>E-mail Address</b> Mgallet@cde.ca.gov					<b>Telephone</b> 916-445-7754		
<b>Signature of the State Superintendent of Public Instruction or Designee</b> 					<b>Date</b> May 13, 2019		
<b>CERTIFICATION OF ACCEPTANCE OF GRANT REQUIREMENTS</b>							
On behalf of the grantee named above, I accept this grant award. I have read the applicable certifications, assurances, terms, and conditions identified on the grant application (for grants with an application process) or in this document or both; and I agree to comply with all requirements as a condition of funding.							
<b>Printed Name of Authorized Agent</b> Eric R. Dill				<b>Title</b> Chief Business Official			
<b>E-mail Address</b> edill@scusd.net					<b>Telephone</b> 408-423-2024		
<b>Signature</b> 					<b>Date</b> 6-18-19		