

STRAIGHT A FUND

DESCRIPTION OF NATURE OF CONSORTIUM RELATIONSHIP

An education consortium is an association of two or more school districts, school buildings, community schools or STEM schools pooling resources to share human and material assets and link academic and administrative resources with the objective of participating in the development and execution of a Straight A Fund grant application. A grant application submitted by an education consortium uses the shared resources of its members to achieve the goals of the grant application through cooperative purchasing, course sharing, professional development, information technology integration and/or faculty and staff networking. Unlike a partnership, each member of an education consortium is responsible for ensuring the Straight A Fund grant application is developed and executed according to the terms of the grant agreement with the Straight A Program Governing Board. Like individual grant applicants, an education consortium can partner with educational stakeholder(s) via a Partnership Agreement to accomplish the goals of the grant application.

In order to ensure the effective implementation of the Straight A Fund throughout the state, each education consortium must identify each member of the education consortium and attach a description of each respective member's role and responsibilities. Additionally, a separate Description of Nature of Partnership must be submitted for any educational stakeholder(s) partnering with the education consortium.

Each member of the education consortium is responsible for the following assurances:

1. Be knowledgeable about the consortium's Straight A Fund grant proposal and application, including advocacy of the Straight A Fund program.
2. Sign and accept the Straight A Program Grant Assurances.
3. Maintain familiarity with the consortium's members and services to enhance the proposal, including specific goals and practices.
4. Demonstrate a commitment to clear roles and responsibilities of each consortium member as it relates to the grant proposal and application.
5. Sustain consistent communication among consortium members and stakeholders with a shared vision of the goals of the grant proposal. This includes participating in regularly scheduled meetings for project management and identifying areas for improvement.
6. Ensure consortium members have appropriate access to data for purposes of grant program improvement and evaluation in accordance with state and federal law.
7. Develop a clear project management plan to sustain the grant project over time.

Education Consortium Signatures

Lead Applicant/Consortium Member

Name: Deborah Kapp-Salupo
Title: Superintendent
IRN: 065227
Phone: 740-622-0211 ext. 104
Email: deborah.kapp-salupo@coshoctoncareers.org
Address: 23640 Airport Rd.
City: Coshocton
State: Ohio
Zip: 43812

Sign: _____
Date: 10/22/2013

Secondary Applicant/Consortium Member

Name: Randy Lucas
Title: Superintendent
IRN: 045203
Phone: 740-425-3615 ext. 3002
Email: barn_rl@omeresanet
Address: 210 West Church Street
City: Barnesville
State: Ohio
Zip: 43713

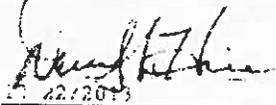
Sign: Randy Lucas
Date: 10/22/2013



STRAIGHT **A** FUND

Consortium Member (if applicable)

Name: David Hire
Title: Superintendent
IRN: 045203
Phone: 740-622-1901
Email: dave.hire@omeresanet
Address: 1207 Cambridge Rd.
City: Coshocton
State: Ohio
Zip: 43942

Sign: 
Date: 10/22/2013

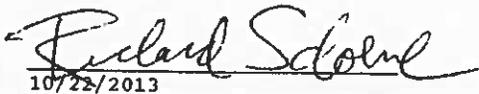
Consortium Member (if applicable)

Name: Don Thompson
Title: Superintendent
IRN: 045450
Phone: 330-424-7714 ext. 2003
Email: don.thompson@omeresanet
Address: 317 North Market St.
City: Lisbon
State: Ohio
Zip: 44432

Sign: 
Date: 10/22/2013

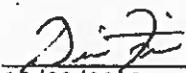
Consortium Member (if applicable)

Name: Richard Schone
Title: Superintendent
IRN: 050856
Phone: 740-695-9130 ext. 190
Email: richard.schoene@omeresanet
Address: 110 Fox Shannon Place
City: St. Clairsville
State: Ohio
Zip: 43950

Sign: 
Date: 10/22/2013

Consortium Member (if applicable)

Name: Dirk Fitch
Title: Superintendent
IRN: 044347
Phone: 740-633-1732 ext. 1
Email: dirk.fitch@omeresanet
Address: 5001 Ayers Limestone Rd.
City: Martins Ferry
State: Ohio
Zip: 43935

Sign: 
Date: 10/22/2013

Consortium Member (if applicable)

Name: _____
Title: _____
IRN: _____
Phone: _____
Email: _____
Address: _____
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Sign: _____
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