

CERTIFICATION STATEMENT

SCHOOL DISTRICT NAME

CODE NUMBER

I hereby certify that the data contained in the accompanying **April 1, 2009 School Choice Claim Form** is accurate and true to the best of my knowledge and belief. A true statement, made under the penalties of perjury.

DATE

SUPERINTENDENT SIGNATURE

Please list the Name, Title, and Telephone Number of the Person Preparing This Report.

NAME

TITLE

TELEPHONE NUMBER