eRateProgram, LLC

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October 30, 2012

Request for Review
TO APPROVE ERATE FUNDS FOR 2012-2013 for 40%

CC Docket No. 02-6

Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

To whom it may concern;

Appellant Name:	**Richard Senturia, consultant for applicant.**
Applicant:	**The Neighborhood Academy, PA**
Applicant BEN #:	**16040701**
Applicant Form 471 #:	**832296**

We filed for The Neighborhood Academy for funding year 2012 – 2013.

When completing the 471 we mistakenly used incorrect enrollment and eligibility numbers resulting in a filing for 20%. We learned of the error with the FCDL. We are attaching documentation to support an increase of the discount rate to 40%.

Respectfully,

John Danley for
Richard Senturia, Consultant
9666 Olive Street Blvd., Suite 215
St. Louis, MO 63132
rsenturia@erateprogram.com

The Neighborhood Academy
Champion Commons • 5231 Penn Avenue, Suite 200 • Pittsburgh, PA 15224 • 412-362-2001 (tel) • 412-362-2004 (fax)

Gentlemen;

Our school had 54 students enrolled when we filed our 471 785942.

Before filing our form 471, we distributed surveys to all 54 students enrolled in our school.

We received completed surveys covering 54 students; each survey contained at least the following information.

Name of Family and first name of each Student
Size of Family
Income level of the family

We received completed surveys covering 35 students from families whose income is below the E-Rate eligibility guidelines.

Those 35 eligible students are 64.815% of the students covered by the completed surveys we received. We extrapolated that 64.815% to our enrollment to complete our form 471 worksheet.

We attach ONE completed survey with personal data blacked out.

We keep all completed and returned surveys on file.

"I certify that only those students who meet the Income Eligibility Guidelines of the National School Lunch Program have been included in Column 5 of Item 9a, of Block 4 of the Form 471."

Respectfully,

Josephine B. Moore, **President**

The Neighborhood Academy

FAMILY INCOME WORKSHEET

DATE: June 16, 2010

NAME of STUDENT: [redacted] _____ Grade: [redacted]
PRINT

PROVIDERS:

NAME of Parent, Guardian or Caregiver A: [redacted] _____
PRINT

NAME of Parent, Guardian or Caregiver B: _____
PRINT

INDICATE ANNUAL / YEARLY AMOUNTS	PROVIDER A $AMT	PROVIDER B $AMT
1 WAGES & SALARIES: *Attach Current Year Federal Income Tax Return*	[redacted]	_____
2 NON-RETIREMENT INVESTMENT INCOME: *Attach Current Year Federal Income Tax Return*	_____	_____
3 GOVERNMENT ASSISTANCE: * *Indicate Type & Provide Documents*		
_____	_____	_____
_____	_____	_____
_____	_____	_____
4 OTHER INCOME [redacted] DESCRIBE*	[redacted]	_____
TOTAL OF ALL LINES:	$ [redacted]	$ _____

* Include amounts of federal, state and local assistance of all types including subsidized housing, food stamps and cash payments.

>> Please indicate the total number of all family members in the household: [redacted]

>> Please indicate the total family members who are under the age of 18: [redacted]

I / We attest the above is a true, accurate and complete listing of the family income of the providers of the above-named student.

Signatures:

[redacted]

Provider A _____ Provider B

Privacy Policy: All information provided to the Academy will be held in confidence and will not be shared outside the Academy.