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School Site - Lead Agency Transition Form

Department of Expanded Learning, After-School Programs Office

Please complete this form if your school site is transitioning to a different Lead Agency.

Principal Name:

Current Lead Agency Name:

Date:

Confirmed New Lead Agency:

Which party made the decision to move forward with this transition?

What is the root cause of the impending transition?

Name up to 3 contributing factors to this root cause?

1.

2.

3.

What was done in an effort to solve this issue so far?

What happened as a result of these efforts?

Please use the space below to provide any other details or questions you need to communicate to the After School Programs Office.

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