

CYCLE 1 - Certification of Data Accuracy

September 30, 2024

I hereby certify by my signature below that I have thoroughly reviewed the information contained in the following individual reports required for the statewide information Cycle 1 report and that the data contained in each report is true, accurate and timely for the reporting period of each required report. I further certify that each report is a complete and full report of all data required by the respective reports and that no further edits or resubmissions of any report is necessary. Therefore, I hereby agree that no changes shall be made to these reports unless required by law or agreed to by the Arkansas Department of Education and based upon the forgoing promises and covenants I submit that the following reports accurately describe the status and condition of the _____ School District as of _____. Specifically, the reports I refer to above and submit as part of the Cycle 1 submission process to the Arkansas Department of Education are as follows:

Annual Financial Report (AFRB) ASR Supplement
Annual Financial Report (AFRB) Level I
Annual Financial Report (AFRB) Level II
Annual Financial Report (AFRB) Level III
Annual Financial Report (AFRB) Legal Balance
Class (Novice Teacher)
Employee Base Salary
Employee Benefits
Employee Fringe Benefits
Employee Additional Duties Detailed
Employee Years of Experience
Salary Schedule
School Calendar
School Summary - General Information
Bank Reconciliation Report
Bank Reconciliation Outstanding Checks
Contact Persons (District)
Contact Persons (School)
School Student ID Change
District Summary - General Information

SCHOOL DISTRICT

LEA

SUPERINTENDENT'S SIGNATURE

DATE

Please complete, sign, scan and email to the below email address:

apscn.SIScertifications@ade.arkansas.gov

PLEASE NOTE THE CHANGE IN THE EMAIL ADDRESS