

CYCLE 9 - Certification of Data Accuracy

August 31, 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 9 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 9 submission process to the Arkansas Department of Education are as follows:

Act 28 Report

Annual Financial Report (AFRB) ASR

Annual Financial Report (AFRB) Level I

Annual Financial Report (AFRB) Level II

Annual Financial Report (AFRB) Level III

Annual Financial Report (AFRB) Building Losses

Annual Financial Report (AFRB) Legal Balance

Athletic Expenditures

Bank Reconciliation

Bank Reconciliation Outstanding Checks Report

Contracted Nonemployees-Nurse

District General Information

District Contact Information

District Health Insurance Match

Employee

Extra-Curricular Athletic and Non-Athletic Mileage

Graduate Students

Programs on Behalf of Other Agencies

Property Values

School General Information

School Contact Information

SIP Vendor Report

SCHOOL DISTRICT

LEA

SUPERINTENDENT'S SIGNATURE

DATE

District SIS Cycle Coordinators please:

- Obtain Superintendent's signature then upload the **Certificate of Data Accuracy Form** prior to processing the "Submit" step of this cycle. (ADE Commissioner's Memo RT-18-034).
- Email Certified Cycle bank reconciliation report(s) along with signatures and explanation of variance to apscn.SIScertifications@arkansas.gov