# Affirmation of Tribal Consultation for SY 2027-2028

LEA or LEA-C Name _____

Tribe Name _____

This affirmation of consultation is for the School Year ending June 30, _____

*Each affected Local Educational Agency (LEA) or LEA-Consortium shall maintain in the agency's records and provide to the Oregon Department of Education a written affirmation signed by the appropriate officials of the local tribe(s) that the consultation required by Section 8538 of the Every Student Succeeds Act (ESSA), Public Law 114-95 has occurred. To ensure timely and meaningful consultation on issues affecting American Indian and Alaska Native students, an affected LEA or LEA-C shall consult with appropriate officials from Indian Tribes located in the area served by the LEA or LEA-C prior to the LEA's or LEA-C's submission of a required plan or application for a covered program under this Act. Such consultation shall be done in a manner that provides the opportunity for Indian Tribes to meaningfully and substantially contribute to such plan.*

*As a state requirement, an affected LEA must engage in Tribal Consultation prior to the submission of the Oregon Unified Grant Application.*

During the Tribal Consultation meeting, the following applications were explicitly discussed -

- ☐ Title I, Part A (Improving Basic Programs Operated by State and Local Educational Agencies
- ☐ Title I, Part C (Migrant Education)
- ☐ Title I, Part D (Neglected and Delinquent or At-Risk Children
- ☐ Title II, Part A (Teacher Quality)
- ☐ Title III, Part A (English Language Acquisition)
- ☐ Title IV, Part A (Student Support and Academic Enrichment Grants)
- ☐ Title IV, Part B (21st Century Community Learning)
- ☐ Title V, Part B, Subpart 2 (Rural and Low-income School Program)
- ☐ Title VI, Part A, Subpart I (Indian Education Formula Grants to Local Educational Agencies or LEA-Consortium)
- ☐ A grant disbursed under a Federal Title Program

  Name of Grant _____
- ☐ Oregon Unified Grant Application (State Compliance and Priority Questions) *Must complete narrative questions in the OUGA.

**Please complete this section in collaboration with the local tribe if tribal consultation occurred:**

**We agree/disagree** that timely and meaningful consultation occurred before the LEA or LEA-C submitted plans or applications for the boxes checked above.

**We agree/disagree** that we have participated in meaningful and timely discussion on the application(s) indicated above and have chosen to participate in the programs marked above.

**We agree/disagree** that timely and meaningful consultation shall be ongoing. We shall meet to assess programs and track accountability on the following dates: _____

| | Printed Name | Signature | Email | Date |
|---|---|---|---|---|
| **Superintendent or Designee** | | | | |
| **Designated Tribal Representative** | | | | |

☐ Check if the tribe has not responded to the LEA's or LEA-C's due diligent attempts for consultation. (LEA and LEA-C must retain evidence for compliance monitoring) List dates & methods used: 1. _____, 2. _____, 3. _____

☐ Tribal Opt-Out Option (must have signature of tribe above): WE HAVE been contacted by the LEA or LEA-C listed above and choose not to participate in consultation for the application(s) checked above at this time.