

District Name:	
Campus Name:	
Campus CDC Number:	

2024 - 2025 ECHS Designation Application Assurances

The ECHS designation application must be reviewed and submitted with a signed assurance document by officials from:

- the school district
- an institution of higher education (IHE)

The signatures must be from individuals who are authorized by their local boards to bind the applicant organizations in a legally binding contractual agreement.

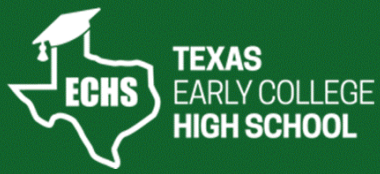
By signing the designation application assurance, the district, IHE partner, and business/industry partner assures that they will:

- Meet all the required designed elements as outlined in the ECHS Blueprint
- Work with the TEA assigned technical assistance provider during the school year to develop a plan to meet the outcomes-based measures

Application review prior to signing is strongly encouraged.

Enter the requested contact information below for the following officials.

Authorized School District or Charter Official		
<i>Title (Dr., Mrs., Ms., Mr.)</i>	<i>Typed First Name</i>	<i>Typed Last Name</i>
<i>Typed Job Title</i>	<i>Phone</i>	<i>Email</i>
<i>District Name</i>		
<i>ECHS Campus Name</i>		
<i>ECHS CDC Number</i>		
<i>Authorized School District or Charter Official Signature</i>		



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Enter the requested contact information below for the following officials.

Authorized Institution of Higher Education (IHE) Official		
<i>Title (Dr., Mrs., Ms., Mr.)</i>	<i>Typed First Name</i>	<i>Typed Last Name</i>
<i>Typed Job Title</i>	<i>Phone</i>	<i>Email</i>
<i>IHE Name</i>		
<i>ECHS Campus Name</i>		
<i>ECHS CDC Number</i>		
<i>Authorized Institution of Higher Education Official Signature</i>		