## Texas Higher Education COORDINATING BOARD

Texas Higher Education Coordinating Board Carl D. Perkins State Leadership Grant: Perkins Excellence in Access and Opportunity (PEAOP) 2024-2025				
Application Cover Page				
Project Title:		-		
Category: PEAOP	Classification: New	Application Number (THECB USE):		
	Applicant Instituti	on		
Name: FICE Code: Mailing Address: City, State, Zip:				
	Project Director			
Name:				
Phone:				
Fax:				
E-mail:				
	Institutional Cont	act		
Name:				
Phone:				
Fax:				
E-mail:				
	Certification			
		ation is, to the best of our knowledge, correct		

and that the institution named above has authorized us as its representatives to obligate this institution. We further certify that any ensuing program and activity will be conducted in accordance with all applicable Federal and State laws and regulations, applications guidelines and instructions, the Provisions and Assurances, Debarment and Suspension, Lobbying Certifications, Drug-Free Workplace requirements, Special Provisions and Assurances, and the schedules as applicable. We are in full acceptance of the terms and conditions described in the THECB's RFA for Perkins State Leadership Grant 2024-2025. It is understood that this application constitutes an offer and, if accepted by the Coordinating Board or renegotiated to acceptance, will form a binding agreement.

Signatures				
Name/Title of Chancellor/President or Authorized Designee	Signature	Date		
Name/Title of Chief Financial Officer or Authorized Designee	Signature	Date		
Name/Title of Institutional Contact	Signature	Date		