

## Part C, Early Education Program Funding Application Fiscal Year 2026–27

The Funding Application is the declaration by the special education local plan area (SELPA) of its intent to apply for funding for the FY 2026–27 Part C, Early Education Program grant.

### Organization Information

**Local Educational Agency/Administrative Unit:**

**Total Budget Amount:**

**SELPA Name:**

**SELPA Code:**

### Contacts

**SELPA Director**

**Name:**

**Telephone:**

**Email:**

**Superintendent**

**Name:**

**Telephone:**

**Email:**

**Administrative Unit (AU)**

**Name:**

**Telephone:**

**Email:**

## Part C, Early Education Program Funding Application Fiscal Year 2026–27

### Contacts

#### Program Contact Person

Name:

Title:

Email:

Telephone:

Mailing Address:

City:

Zip Code:

County:

**Certification:** I hereby certify that this application will be the basis for the operation and administration of Part C, Early Education Program and will meet all applicable requirements of state and federal rules and regulations. To the best of my knowledge, the information contained in this application is correct and complete and this applicant hereby agrees to have its use of funds reviewed and/or audited.

**Authorized Signature:**

**Date:**

**Print Name and Title of Authorized Signature:**

Email digitally signed document to:  
[EarlyStartInvoices@dds.ca.gov](mailto:EarlyStartInvoices@dds.ca.gov)

*For DDS Use Only:*  
*Date Received by DDS:*  
*Date Approved by DDS:*  
*Approved By:*

**Note: No funds will be released to the SELPA without an Authorized Signature on this form.**