

PERTH AMBOY CATHOLIC SCHOOL-02409555 - Corrective Action Report (Detail)

Section	Form Subsection	Sponsor/Site Name	Question #	Due Date	Status
Certification and Benefit Issuance	Certification and Benefit Issuance (On-Site Assessment Tool) (124H)	PERTH AMBOY CATHOLIC SCHOOL-02409555	126	03/02/2024	CAP Accepted
Corrective Action History	Corrective Action Plan: Accepted by Dianne Kennedy 03/15/2024 07:42 AM				
	CAP Accepted				
	Corrective Action Plan: Submitted by Angelina Ramirez 02/28/2024 05:34 PM				
	Moving forward I will ensure that applications are complete according to the checklist.				
Corrective Action History	Flagged by Dianne Kennedy 01/31/2024 08:14 AM				
	18 incomplete and/or incorrectly determined applications were found during the State Agency review of the selected applications. Errors were recorded on the Eligibility Certification and Benefit Issuance Worksheet (SFA-1 and/or SFA-2.) The SFA must indicate the date of correction for all application errors. Do not identify the students' names when providing the documentation under the SFA comments. *****The number of Certification and Benefit Errors are greater or equal to 10%, therefore an Independent Review of applications must be completed for next school year. More details will be provided later in the school year regarding the process and expectations for the Independent Review.				
Verification	Verification (On-Site Assessment Tool) (207H)	PERTH AMBOY CATHOLIC SCHOOL-02409555	215	03/02/2024	CAP Accepted
Corrective Action History	Corrective Action Plan: Accepted by Dianne Kennedy 03/15/2024 07:42 AM				
	CAP Accepted				
	Corrective Action Plan: Submitted by Angelina Ramirez 02/28/2024 05:37 PM				
	Moving forward I will ensure that the verification process is completed by the deadline by starting the process earlier.				
Corrective Action History	Flagged by Dianne Kennedy 01/31/2024 08:14 AM				
	Verification Result Notification was sent 12/5/23. The SFA must complete the Verification Process which includes sending the "Verification Results Letter" (Form 244) by the November 15th deadline. Explain, in detail, how the finding will be corrected and the measures taken to ensure that it will not reoccur in the future. Indicate the date of implementation.				

Report Selections

Flagged, CAP Submitted, CAP Rejected, CAP Accepted, CAP Removed, Problem resolved, Re-Flagged