



**NHED ESSER Programmatic Monitoring
Corrective Action Plan**
(Use a separate form for each Corrective Action Item)

LEA Name:

Robert Milliken

12/05/2022

Name of person completing this form

Date

Finding Number:

Description of Finding:

Please check the box that most appropriately matches the LEA's status in implementing the Corrective Action Plan ("CAP"). Please also provide any documentation that supports the LEA's assertion that the CAP has been fully implemented.

- (1) Partially implemented
- (2) Fully implemented
- (3) No further action required (provide detailed explanation below)

If option (1) is selected, please explain the implementation status as well as the anticipated completion date in the space below:

We have the fiber installed for most of the project. We still need the trenching to finish the
 the rest of the fiber runs. The network equipment has a delay due backorders. Once any equipment is
 installed we will place an inventory sticker on it and add it to our inventory. All equipment will be mark
 purchased with ESSER funds.

Anticipated Completion Date: June 30th 2023

If option (2) or (3) is selected, please explain how the plan was implemented or why no further action is required in the space below:

Please return to Ellen.C.Podgorski@doe.nh.gov at the Division of Learner Support