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| 2016-2018 INDUSTRY CLUSTER NAME Innovative Academy – the Next Generation of Early College High Schools |
| **Program authority:** | TEC §29.908; GAA, Art III, Rider 52, 84th Texas Legislature; WIOA §17.278 and §17.258; and Carl Perkins Career and Tech Education Act | **FOR TEA USE ONLY**Write NOGA ID here: |
| **Grant Period** | February 1, 2017, to May 30, 2018 |  |
| **Application deadline:** | 5:00 p.m. Central Time, November 1, 2016 | Place date stamp here. |
| **Submittal information:** | **Three** complete copies of the application, printed on one side only. All copies must have an original signature (blue ink preferred) of the person authorized to bind the applicant in a contract. Applications must be received no later than the aforementioned time and date at this address:Document Control Center, Division of Grants AdministrationTexas Education Agency, 1701 North Congress AveAustin, TX 78701-1494 |  |
| **Contact information:** | Lauren Dwiggins, lauren.dwiggins@tea.texas.gov; (512) 463-9581 |  |
| [Schedule #1—General Information](http://tea.texas.gov/Grants/Files/Instruction-1_Gen_Federal.pdf) |
| Part 1: Applicant Information |
| Organization name | County-District # | Campus name/#  | Amendment # |
|       |       |       |       |
| Vendor ID # | ESC Region # | DUNS #  |
|       |       |       |
| Mailing address | City | State | ZIP Code  |
|       |       | TX |      -      |
| Primary Contact  |
| First name | M.I. | Last name | Title |
|       |    |       |       |
| Telephone # | Email address | FAX # |
|       |       |       |
| Secondary Contact  |
| First name | M.I. | Last name | Title |
|       |      |       |       |
| Telephone # | Email address | FAX # |
|       |       |       |
| Part 2: Certification and Incorporation |
| I hereby certify that the information contained in this application is, to the best of my knowledge, correct and that the organization named above has authorized me as its representative to obligate this organization in a legally binding contractual agreement. I further certify that any ensuing program and activity will be conducted in accordance with all applicable federal and state laws and regulations, application guidelines and instructions, the general provisions and assurances, debarment and suspension certification, lobbying certification requirements, special provisions and assurances, and the schedules attached as applicable. **It is understood by the applicant that this application constitutes an offer and, if accepted by the Agency or renegotiated to acceptance, will form a binding agreement.** |
| Authorized Official: |
| First name | M.I. | Last name | Title |
|       |      |       |       |
| Telephone # | Email address | FAX # |
|       |       |       |
| Signature (blue ink preferred) | Date signed |
|  |       |
| *Only the legally responsible party may sign this application.* |
| [Schedule #1—General Information](http://tea.texas.gov/Grants/Files/Instruction-1_Gen_Federal.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| Part 3: Schedules Required for New or Amended Applications |

An X in the “New” column indicates a required schedule that must be submitted as part of any new application. The applicant must mark the “New” checkbox for each additional schedule submitted to complete the application.

For amended applications, the applicant must mark the “Amended” checkbox for each schedule being submitted as part of the amendment.

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| Schedule # | Schedule Name | Application Type |
| New | Amended |
| 1 | General Information | [x]  | [x]  |
| 2 | Required Attachments and Provisions and Assurances | [x]  | N/A |
| 4 | Request for Amendment | N/A | [x]  |
| 5 | Program Executive Summary | [x]  | [ ]  |
| 6 | Program Budget Summary | [x]  | [ ]  |
| 7 | Payroll Costs (6100) | See Important Note For Competitive Grants\* | [ ]  |
| 8 | Professional and Contracted Services (6200) | [ ]  |
| 9 | Supplies and Materials (6300) | [ ]  |
| 10 | Other Operating Costs (6400) | [ ]  |
| 11 | Capital Outlay (6600) | [ ]  |
| 12 | Demographics and Participants to Be Served with Grant Funds | [x]  | [ ]  |
| 13 | Needs Assessment | [x]  | [ ]  |
| 14 | Management Plan | [x]  | [ ]  |
| 15 | Project Evaluation | [x]  | [ ]  |
| 16 | Responses to Statutory Requirements | [x]  | [ ]  |
| 17 | Responses to TEA Requirements | [x]  | [ ]  |
| 20 | Outside Sources of Income and Pre-Existing Content (Required for IHEs) | [ ]  | [ ]  |

**\*IMPORTANT NOTE FOR COMPETITIVE GRANTS:** Schedules #7, #8, #9, #10 and #11 are required schedules if any dollar amount is entered for the corresponding class/object code on Schedule #6—Program Budget Summary. For example, if any dollar amount is budgeted for class/object code 6100 on Schedule #6—Program Budget Summary, then Schedule #7—Payroll Costs (6100) is required. If it is either blank or missing from the application, **the application will be disqualified***.*

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| Part 4: Single Audit Compliance for IHEs and Nonprofit Organizations |

**INSTRUCTIONS:** This part of Schedule #1 is required only for colleges, universities, and nonprofit organizations (other than open-enrollment charter schools)

Enter the start and end dates of your fiscal year in Section 1.

In Section 2, check the appropriate box to indicate whether or not your organization is included in the annual statewide single audit. Public IHEs are generally included, and nonprofit organizations are generally not included.

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| Section 1: Applicant Organization’s Fiscal Year |
| Start date (MM/DD):       | End date (MM/DD):       |
| Section 2: Applicant Organizations and the Texas Statewide Single Audit |
| Yes: [ ]  | No: [ ]  |

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| [Schedule #2—Required Attachments and Provisions and Assurances](http://tea.texas.gov/Grants/Files/Instruction-2.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| Part 1: Required Attachments |

The following table lists the fiscal-related and program-related documents that are required to be submitted with the application (attached to the back of each copy, as an appendix).

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| # | Applicant Type | Name of Required Fiscal-Related Attachment  |
| 1. | Nonprofit organizations, excluding ISDs and open-enrollment charter schools | Proof of nonprofit status (see [General and Fiscal Guidelines](http://tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769819073), Required Fiscal-Related Attachments, for details)  |
| **#** | **Name of Required Program-Related Attachment** | **Description of Required Program-Related Attachment** |
| 1. | MOU | The applicant must submit a draft Memorandum of Understanding among the dual credit partner, school district and school which establishes joint decision-making procedures that allow for planning and implementation of a coherent program across the institutions. The partnership and the MOU must include provisions and processes for collecting, sharing, and reviewing student data to assess the progress of the ECHS. |
| Part 2: Acceptance and Compliance |

By marking an X in each of the boxes below, the authorized official who signs Schedule #1—General Information certifies his or her acceptance of and compliance with all of the following guidelines, provisions, and assurances.

**Note that provisions and assurances specific to this program are listed separately, in Part 3 of this schedule, and require a separate certification.**

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| X | Acceptance and Compliance  |
| [ ]  | I certify my acceptance of and compliance with the [General and Fiscal Guidelines](http://tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769819073). |
| [ ]  | I certify my acceptance of and compliance with the program guidelines for this grant. |
| [ ]  | I certify my acceptance of and compliance with all [General Provisions and Assurances](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769819083) requirements. |
| [ ]  | I certify that I am not debarred or suspended. I also certify my acceptance of and compliance with all [Debarment and Suspension Certification](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769819083) requirements. |
| [ ]  | I certify that this organization does not spend federal appropriated funds for lobbying activities and certify my acceptance of and compliance with all [Lobbying Certification](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769819083) requirements.  |
| [ ]  | I certify my acceptance of and compliance with [No Child Left Behind Act of 2001 Provisions and Assurances](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769819083) requirements. |

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| [Schedule #2—Required Attachments and Provisions and Assurances](http://tea.texas.gov/Grants/Files/Instruction-2.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| Part 3: Program-Specific Provisions and Assurances |
| [ ]  | I certify my acceptance of and compliance with all program-specific provisions and assurances listed below. |
| # | Provision/Assurance |
| 1. | The applicant provides assurance that program funds will supplement (increase the level of service), and not supplant (replace) state mandates, State Board of Education rules, and activities previously conducted with state or local funds. The applicant provides assurance that state or local funds may not be decreased or diverted for other purposes merely because of the availability of these funds. The applicant provides assurance that program services and activities to be funded from this grant will be supplementary to existing services and activities and will not be used for any services or activities required by state law, State Board of Education rules, or local policy. |
| 2. | The applicant provides assurance that the application does not contain any information that would be protected by the Family Educational Rights and Privacy Act (FERPA) from general release to the public. |
| 3. | The applicant provides assurance that a liaison that represents the industry partner(s) will interact directly and frequently with ECHS staff. |
| 4. | The applicant provides assurance that the industry partner will actively participate in the development of curriculum for the INDUSTRY CLUSTER NAME Innovative Academy ECHS in order to ensure that the curriculum is appropriately aligned to marketable skills in the identified high-demand occupations, and may include industry recognized credentialing as part of degree plan design. |
| 5. | The applicant provides assurance that the industry partner will assist in the development and implementation of industry experiences, including mentorship programs, internships, externships, and/or apprenticeships, that expose students to applied learning and real-world work activities in the identified high-demand occupation(s) |
| 6. | The applicant provides assurance that the INDUSTRY CLUSTER NAME Innovative Academy ECHS will employ a career counselor that serves only students of the INDUSTRY CLUSTER NAME Innovative Academy ECHS. |
| 7. | The applicant provides assurance that the INDUSTRY CLUSTER NAME Innovative Academy ECHS will develop and maintain a leadership team that meets regularly to address issues of curriculum, school design, and sustainability.  |
| 8. | The applicant provides assurance that the leadership team will consist of high-level personnel with decision-making authority who meet regularly and report to each member organization or entity and will include a. District: superintendent, associate superintendent of curriculum and instruction, or equivalent position, career and technical education director, and INDUSTRY CLUSTER NAME Innovative Academy ECHS principal or directorb. Primary dual credit partner: university or college president, provost, dean of college of education, and ECHS liaisonc. College or university partner: INDUSTRY CLUSTER NAME Innovative Academy ECHS liaisond. Industry Partner: INDUSTRY CLUSTER NAME Innovative Academy ECHS liaison |
| 9. | The applicant provides assurance that the partnership and the MOU will include provisions and processes for collecting, sharing, and reviewing student data to assess the progress of the INDUSTRY CLUSTER NAME Innovative Academy ECHS. |
| 10. | The applicant provides assurance that students enrolled in an ECHS course for both college and high school credit will not be required to pay for tuition, fees, or textbooks and that the school district or charter in which the student is enrolled will pay for tuition, fees, and required textbooks to the extent those charges are not waived by the partner IHE. |
| 11. | The applicant provides assurance that the partnership will provide opportunities for ECHS teachers and higher-education faculty to collaborate through planning, teaching, and professional development. |
| 12. | The applicant provides assurance that the INDUSTRY CLUSTER NAME Innovative Academy ECHS will provide a course of study that enables a participating student to receive a high school diploma and either an associate’s degree or 60 semester hours toward a baccalaureate degree during grades 9–12. An academic plan must be in place showing how students will progress toward this goal. |
| 13. | The applicant provides assurance that the INDUSTRY CLUSTER NAME Innovative Academy ECHS will administer a college placement exam (Texas Success Initiative Assessment (TSIA) to all incoming 9th-graders to assess college readiness and to enable students to begin college courses based on their performance—as soon as they are able, possibly as early as the 9th grade. |
| [Schedule #2—Required Attachments and Provisions and Assurances](http://tea.texas.gov/Grants/Files/Instruction-2.pdf) (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
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| 14. | The applicant provides assurance that the INDUSTRY CLUSTER NAME Innovative Academy ECHS will be an autonomous high school that meets one of the following criteria:a. Is located on a college or university campus b. Is a stand-alone high school campus near a college or university campus c. Is a small learning community within a larger high school that is near a college or university campus (where the ECHS is physically separated from the larger high school and ECHS students are a separate cohort with their own teachers, leader, schedule, and curriculum plan) |
| 15. | The applicant provides assurance that the INDUSTRY CLUSTER NAME Innovative Academy ECHS will be a full-day program (i.e., full day as defined in PEIMS) in which all academic instruction and support services are delivered to students at the designated ECHS campus and that students will not travel between two high school campuses in order to receive instruction or support services. |
| 16. | The applicant provides assurance that the INDUSTRY CLUSTER NAME Innovative Academy ECHS will be led by a principal or director who is 100% dedicated to the school. |

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| [Schedule #4—Request for Amendment](http://tea.texas.gov/Grants/Files/Instruction-4.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| Part 1: Submitting an Amendment |

This schedule is used to amend a grant application that has been approved by TEA and issued a Notice of Grant Award (NOGA). **Do not submit this schedule with the original grant application.** Refer to the instructions to this schedule for information on what schedules must be submitted with an amendment.

An amendment may be submitted by mail ***or*** by fax. Do not submit the same amendment by both methods. Amendments submitted via email will not be accepted.

If the amendment is mailed, submit three copies of each schedule pertinent to the amendment to the following address: Document Control Center, Division of Grants Administration, Texas Education Agency, 1701 N. Congress Ave.,
Austin, TX 78701-1494.

If the amendment is faxed, submit one copy of each schedule pertinent to the amendment to either of the following fax numbers: (512) 463-9811 or (512) 463-7915.

The last day to submit an amendment to TEA is listed on the [TEA Grant Opportunities](http://burleson.tea.state.tx.us/GrantOpportunities/forms/GrantProgramSearch.aspx) page. An amendment is effective on the day TEA receives it in substantially approvable form. All amendments are subject to review and approval by TEA.

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| Part 2: When an Amendment Is Required |

For all grants, regardless of dollar amount, prior written approval is required to make certain changes to the application. Refer to the “When to Amend the Application” guidance posted in the Amendment Submission Guidance section of the Division of Grants Administration [Administering a Grant](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769814700) page to determine when an amendment is required for this grant. Use that guidance to complete Part 3 and Part 4 of this schedule.

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| Part 3: Revised Budget |
|  | A | B | C | D |
| # | Schedule # | Class/Object Code | Grand Total from Previously Approved Budget | Amount Deleted | Amount Added | New Grand Total |
| 1. | Schedule #7: Payroll | 6100 | $      | $      | $      | $      |
| 2. | Schedule #8: Contracted Services | 6200 | $      | $      | $      | $      |
| 3. | Schedule #9: Supplies and Materials | 6300 | $      | $      | $      | $      |
| 4. | Schedule #10: Other Operating Costs | 6400 | $      | $      | $      | $      |
| 5. | Schedule #11: Capital Outlay | 6600 | $      | $      | $      | $      |
| 6. | Total direct costs: | $      | $      | $      | $      |
| 7. | [Indirect cost](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=3842) (  %): | $      | $      | $      | $      |
| 8. | Total costs: | $      | $      | $      | $      |

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| [Schedule #4—Request for Amendment](http://tea.texas.gov/Grants/Files/Instruction-4.pdf) (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| Part 4: Amendment Justification |
| Line # | Schedule # Being Amended | Description of Change | Reason for Change |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |
| 6. |  |  |  |
| 7. |  |  |  |

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| [Schedule #5—Program Executive Summary](http://tea.texas.gov/Grants/Files/Instructions-05_ExecutiveSummary.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| Provide a brief overview of the program you plan to deliver. Refer to the instructions for a description of the requested elements of the summary. Response is limited to space provided, front side only, font size no smaller than 10 point Arial. |
| Click and type here to enter response. |

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| [Schedule #5—Program Executive Summary (cont.)](http://tea.texas.gov/Grants/Files/Instructions-05_ExecutiveSummary.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| Provide a brief overview of the program you plan to deliver. Refer to the instructions for a description of the requested elements of the summary. Response is limited to space provided, front side only, font size no smaller than 10 point Arial. |
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| [Schedule #6—Program Budget Summary](http://tea.texas.gov/Grants/Files/Instruction-6.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| Program authority: TEC §29.908; GAA, Art III, Rider 52, 84th Texas Legislature; Workforce Innovation and Opportunity Act §17.278 and §17.258; and Carl D. Perkins Career and Technical Education Act |
| Grant period: February 1, 2017, to May 30, 2018 | Fund codes: See Notice of Grant Award (NOGA)  |
| **Budget Summary**  |
| Schedule # | Title | Class/ Object Code | Program Cost | Admin Cost | Total Budgeted Cost | Cost Share |
| Schedule #7 | Payroll Costs (6100) | 6100 | $      | $      | $      | $      |
| Schedule #8 | Professional and Contracted Services (6200) | 6200 | $      | $      | $      | $      |
| Schedule #9 | Supplies and Materials (6300) | 6300 | $      | $      | $      | $      |
| Schedule #10 | Other Operating Costs (6400) | 6400 | $      | $      | $      | $      |
| Schedule #11 | Capital Outlay (6600) | 6600 | $      | $      | $      | $      |
| Total direct costs: | $      | $      | $      | $      |
| Percentage% [indirect costs](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=3842) (see note): | N/A | $      | $      | $      |
| Grand total of budgeted costs (add all entries in each column): | **$** | **$** | **$** | $      |
| Administrative Cost Calculation |
| Enter the total grant amount requested: | $      |
| Percentage limit on administrative costs established for the program (10%): | × .10 |
| Multiply and round down to the nearest whole dollar. Enter the result. This is the maximum amount allowable for administrative costs, including indirect costs: | $      |

NOTE: Indirect costs are calculated and reimbursed based on actual expenditures when reported in the expenditure reporting system, regardless of the amount budgeted and approved in the grant application. If indirect costs are claimed, they are part of the total grant award amount. They are not in addition to the grant award amount.

Indirect costs are not required to be budgeted in the grant application in order to be charged to the grant. Do not submit an amendment solely for the purpose of budgeting indirect costs.

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| [Schedule #7—Payroll Costs (6100)](http://tea.texas.gov/Grants/Files/Instruction-7.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| Employee Position Title | Estimated # of Positions 100% Grant Funded | Estimated # of Positions <100% Grant Funded | Grant Amount Budgeted | Cost Share |
| Academic/Instructional |
| 1 | Teacher |       |       | $      | $      |
| 2 | Educational aide |       |       | $      | $      |
| 3 | Tutor |       |       | $      | $      |
| Program Management and Administration |
| 4 | Project director |       |       | $      | $      |
| 5 | Project coordinator |       |       | $      | $      |
| 6 | Teacher facilitator |       |       | $      | $      |
| 7 | Teacher supervisor |       |       | $      | $      |
| 8 | Secretary/administrative assistant |       |       | $      | $      |
| 9 | Data entry clerk |       |       | $      | $      |
| 10 | Grant accountant/bookkeeper |       |       | $      | $      |
| 11 | Evaluator/evaluation specialist |       |       | $      | $      |
| Auxiliary |
| 12 | Counselor |       |       | $      | $      |
| 13 | Social worker |       |       | $      | $      |
| 14 | Community liaison/parent coordinator |       |       | $      | $      |
| Other Employee Positions |
| 21 | Title |       |       | $      | $      |
| 22 | Title |       |       | $      | $      |
| 23 | Title |       |       | $      | $      |
| 24 | Subtotal employee costs: | $      | $      |
| Substitute, Extra-Duty Pay, Benefits Costs |
| 25 | 6112 | Substitute pay | $      | $      |
| 26 | 6119 | Professional staff extra-duty pay | $      | $      |
| 27 | 6121 | Support staff extra-duty pay | $      | $      |
| 28 | 6140 | Employee benefits | $      | $      |
| 29 | 61XX | Tuition remission (IHEs only)  | $      | $      |
| 30 | Subtotal substitute, extra-duty, benefits costs | $      | $      |
| 31 | **Grand total (Subtotal employee costs plus subtotal substitute, extra-duty, benefits costs):** | $      | $      |

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Division of Grants Administration [Administering a Grant](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769814700) page.

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| [**Schedule #8—Professional and Contracted Services (6200)**](http://tea.texas.gov/Grants/Files/Instructions-08_6200_costshare.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| NOTE: Specifying an individual vendor in a grant application does not meet the applicable requirements for sole-source providers. TEA’s approval of such grant applications does not constitute approval of a sole-source provider. |
| Professional and Contracted Services Requiring Specific Approval |
| Expense Item Description | Grant Amount Budgeted | Cost Share |
| 6269 | Rental or lease of buildings, space in buildings, or land | $      | $      |
| Specify purpose: |
| 1. **Subtotal of professional and contracted services (6200) costs requiring specific approval:**
 | $      | $      |
| Professional and Contracted Services |
| # | Description of Service and Purpose | Grant Amount Budgeted | Cost Share |
| 1 |       | $      | $      |
| 2 |       | $      | $      |
| 3 |       | $      | $      |
| 4 |       | $      | $      |
| 5 |       | $      | $      |
| 6 |       | $      | $      |
| 7 |       | $      | $      |
| 8 |       | $      | $      |
| 9 |       | $      | $      |
| 10 |       | $      | $      |
| 11 |       | $      | $      |
| 12 |       | $      | $      |
| 13 |       | $      | $      |
| 14 |       | $      | $      |
| 1. **Subtotal of professional and contracted services:**
 | $      | $      |
| 1. **Remaining 6200—Professional and contracted services that do not require specific approval:**
 | $      | $      |
| **(Sum of lines a, b, and c) Grand total** | $      | $      |

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Division of Grants Administration [Administering a Grant](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769814700) page.

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| [Schedule #9—Supplies and Materials (6300)](http://tea.texas.gov/Grants/Files/Instruction-9.pdf) |
| County-District Number or Vendor ID:       | Amendment number (for amendments only):      |
|  Supplies and Materials Requiring Specific Approval |
| **Expense Item Description** | **Grant Amount Budgeted** | **Cost Share** |
| 6300 | Total supplies and materials that do not require specific approval:  | $      | $      |
| **Grand total:** | **$** | $      |

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Division of Grants Administration [Administering a Grant](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769814700) page.

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| [Schedule #10—Other Operating Costs (6400)](http://tea.texas.gov/Grants/Files/Instruction-10.pdf) |
| County-District Number or Vendor ID:       | Amendment number (for amendments only):      |
| Expense Item Description  | Grant Amount Budgeted | Cost Share |
| 6412 | Travel for students to conferences (does not include field trips). Requires authorization in writing.  | $      | $      |
| Specify purpose:       |
| 6412/6494 | Educational Field Trip(s). Must be allowable per Program Guidelines and must attach Educational Field Trip Justification Form.  | $      | $      |
| 6413 | Stipends for non-employees other than those included in 6419  | $      | $      |
| 6419 | Non-employee costs for conferences. Requires authorization in writing.  | $      | $      |
| Subtotal other operating costs requiring specific approval: | $      | $      |
|  | Remaining 6400—Other operating costs that do not require specific approval: | $      | $      |
| **Grand total:** | **$** | $      |

In-state travel for employees does not require specific approval.

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Division of Grants Administration [Administering a Grant](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769814700) page.

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| [Schedule #11—Capital Outlay (6600)](http://tea.texas.gov/Grants/Files/Instruction-11.pdf) |
| County-District Number or Vendor ID:       | Amendment number (for amendments only):      |
| # | Description and Purpose | Quantity | Unit Cost | Grant Amount Budgeted | Cost Share |
| 6669—Library Books and Media (capitalized and controlled by library)  |
| 1 |       | N/A | N/A | $      | $      |
| 66XX—Computing Devices, capitalized  |
| 2 |       |       | $      | $      | $      |
| 3 |       |       | $      | $      | $      |
| 4 |       |       | $      | $      | $      |
| 5 |       |       | $      | $      | $      |
| 6 |       |       | $      | $      | $      |
| 7 |       |       | $      | $      | $      |
| 8 |       |       | $      | $      | $      |
| 9 |       |       | $      | $      | $      |
| 10 |       |       | $      | $      | $      |
| 11 |       |       | $      | $      | $      |
| 66XX—Software, capitalized  |
| 12 |       |       | $      | $      | $      |
| 13 |       |       | $      | $      | $      |
| 14 |       |       | $      | $      | $      |
| 15 |       |       | $      | $      | $      |
| 16 |       |       | $      | $      | $      |
| 17 |       |       | $      | $      | $      |
| 18 |       |       | $      | $      | $      |
| 66XX—Equipment, furniture, or vehicles  |
| 19 |       |       | $      | $      | $      |
| 20 |       |       | $      | $      | $      |
| 21 |       |       | $      | $      | $      |
| 22 |       |       | $      | $      | $      |
| 23 |       |       | $      | $      | $      |
| 24 |       |       | $      | $      | $      |
| 25 |       |       | $      | $      | $      |
| 26 |       |       | $      | $      | $      |
| 27 |       |       | $      | $      | $      |
| 28 |       |       | $      | $      | $      |
| 66XX—Capital expenditures for additions, improvements, or modifications to capital assets that materially increase their value or useful life (not ordinary repairs and maintenance) |
| 29 |       | $      | $      |
| **Grand total:** | **$** | $      |

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Division of Grants Administration [Administering a Grant](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769814700) page.

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| Schedule #12—Demographics and Participants to Be Served with Grant Funds |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Part 1: Student Demographics.** Enter the data requested for the population to be served by this grant program. If data is not available, enter DNA. Use the comments section to add a description of any data not specifically requested that is important to understanding the population to be served by this grant program. |
| Total campus enrollment: |     |
| Category | Number | Percentage | Category | Percentage |
| African American |     |    % | Attendance rate |    % |
| Hispanic |     |    % | Annual dropout rate (Gr 9-12) |    % |
| White |     |    % | Students taking the ACT and/or SAT |    % |
| Asian |     |    % | Average SAT score (number value, not a percentage) |     |
| Economically disadvantaged |     |    % | Average ACT score (number value, not a percentage) |     |
| Limited English proficient (LEP) |     |    % | Students classified as “at risk” per Texas Education Code §29.081(d) |     |
| Disciplinary placements |     |    % | State assessment data |     |
| Comments |
|  |
| **Part 2: Teacher Demographics.** Enter the data requested. If data is not available, enter DNA. |
| Category | Number | Percentage | Category | Number | Percentage |
| African American |     |    % | No degree |     |    % |
| Hispanic |     |    % | Bachelor’s degree |     |    % |
| White |     |    % | Master’s degree |     |    % |
| Asian |     |    % | Doctorate |     |    % |
| 1-5 years exp. |     |    % | Avg. salary, 1-5 years exp. |     | N/A |
| 6-10 years exp. |     |    % | Avg. salary, 6-10 years exp. |     | N/A |
| 11-20 years exp. |     |    % | Avg. salary, 11-20 years exp. |     | N/A |
| Over 20 years exp. |     |    % | Avg. salary, over 20 years exp. |     | N/A |

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| Schedule #12—Demographics and Participants to Be Served with Grant Funds (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Part 3: Students to Be Served with Grant Funds.** Enter the number of students in each grade, by type of school, projected to be served under the grant program.  |
| School Type | PK(3-4) | K | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | Total |
| Public |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| Open-enrollment charter school |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| Public institution |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| Private nonprofit |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| Private for-profit |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| **TOTAL:** |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| **Part 4: Teachers to Be Served with Grant Funds.** Enter the number of teachers, by grade and type of school, projected to be served under the grant program. |
| School Type | PK(3-4) | K | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | Total |
| Public |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| Open-enrollment charter school |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| Public institution |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| Private nonprofit |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| Private for-profit |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
| **TOTAL:** |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |

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| Schedule #13—Needs Assessment |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Part 1: Process Description.** A needs assessment is a systematic process for identifying and prioritizing needs, with “need” defined as the difference between current achievement and desired or required accomplishment. Describe your needs assessment process, including a description of how needs are prioritized. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #13—Needs Assessment (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Part 2: Alignment with Grant Goals and Objectives.** List your top five needs, in rank order of assigned priority. Describe how those needs would be effectively addressed by implementation of this grant program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| # | Identified Need | How Implemented Grant Program Would Address |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |
| 5. |  |  |

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| Schedule #14—Management Plan |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Part 1: Staff Qualifications.** List the titles of the primary project personnel and any external consultants projected to be involved in the implementation and delivery of the program, along with desired qualifications, experience, and any requested certifications. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| # | Title | Desired Qualifications, Experience, Certifications |
| 1. |       |       |
| 2. |       |       |
| 3. |       |       |
| 4. |       |       |
| 5. |       |       |
| Part 2: Milestones and Timeline. Summarize the major objectives of the planned project, along with defined milestones and projected timelines. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| # | Objective | Milestone | Begin Activity | End Activity |
| 1. |       | 1. |       | XX/XX/XXXX | XX/XX/XXXX |
| 2. |       | XX/XX/XXXX | XX/XX/XXXX |
| 3. |       | XX/XX/XXXX | XX/XX/XXXX |
| 4. |       | XX/XX/XXXX | XX/XX/XXXX |
| 5. |       | XX/XX/XXXX | XX/XX/XXXX |
| 2. |       | 1. |       | XX/XX/XXXX | XX/XX/XXXX |
| 2. |       | XX/XX/XXXX | XX/XX/XXXX |
| 3. |       | XX/XX/XXXX | XX/XX/XXXX |
| 4. |       | XX/XX/XXXX | XX/XX/XXXX |
| 5. |       | XX/XX/XXXX | XX/XX/XXXX |
| 3. |       | 1. |       | XX/XX/XXXX | XX/XX/XXXX |
| 2. |       | XX/XX/XXXX | XX/XX/XXXX |
| 3. |       | XX/XX/XXXX | XX/XX/XXXX |
| 4. |       | XX/XX/XXXX | XX/XX/XXXX |
| 5. |       | XX/XX/XXXX | XX/XX/XXXX |
| 4. |       | 1. |       | XX/XX/XXXX | XX/XX/XXXX |
| 2. |       | XX/XX/XXXX | XX/XX/XXXX |
| 3. |       | XX/XX/XXXX | XX/XX/XXXX |
| 4. |       | XX/XX/XXXX | XX/XX/XXXX |
| 5. |       | XX/XX/XXXX | XX/XX/XXXX |
| 5. |       | 1. |       | XX/XX/XXXX | XX/XX/XXXX |
| 2. |       | XX/XX/XXXX | XX/XX/XXXX |
| 3. |       | XX/XX/XXXX | XX/XX/XXXX |
| 4. |       | XX/XX/XXXX | XX/XX/XXXX |
| 5. |       | XX/XX/XXXX | XX/XX/XXXX |
| Unless pre-award costs are specifically approved by TEA, grant funds will be used to pay only for activities occurring between the beginning and ending dates of the grant, as specified on the Notice of Grant Award.  |

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| Schedule #14—Management Plan (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Part 3: Feedback and Continuous Improvement.** Describe the process and procedures your organization currently has in place for monitoring the attainment of goals and objectives. Include a description of how the plan for attaining goals and objectives is adjusted when necessary and how changes are communicated to administrative staff, teachers, students, parents, and members of the community. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |
| Part 4: Sustainability and Commitment. Describe any ongoing, existing efforts that are similar or related to the planned project. How will you coordinate efforts to maximize effectiveness of grant funds? How will you ensure that all project participants remain committed to the project’s success? Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| [Schedule #14—Management Plan](http://tea.texas.gov/Grants/Files/Instructions-14_ManagementPlanAbv.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Part 1: Staff Qualifications.** List the titles of the primary project personnel and any external consultants projected to be involved in the implementation and delivery of the program, along with desired qualifications, experience, and any requested certifications. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| # | Title | Desired Qualifications, Experience, Certifications |
| 1. |       |       |
| 2. |       |       |
| 3. |       |       |
| 4. |       |       |
| 5. |       |       |
| Part 2: Activities and Timeline. Summarize the major activities of the planned project and identify the staff responsible. Indicate the projected timeline. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| # | Activities | Positions Responsible | Beginning Date | Ending Date |
| 1. |       |       |       |       |
| 2. |       |       |       |       |
| 3. |       |       |       |       |
| 4. |       |       |       |       |
| 5. |       |       |       |       |
| 6. |       |       |       |       |
| 7. |       |       |       |       |
| 8. |       |       |       |       |
| 9. |       |       |       |       |
| 10. |       |       |       |       |
| Unless pre-award costs are specifically approved by TEA, grant funds will be used to pay only for activities occurring between the beginning and ending dates of the grants, as specified on the Notice of Grant Award. |

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| Schedule #15—Project Evaluation |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Part 1: Evaluation Design.** List the methods and processes you will use on an ongoing basis to examine the effectiveness of project strategies, including the indicators of program accomplishment that are associated with each. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| # | Evaluation Method/Process | Associated Indicator of Accomplishment |
| 1. |  | 1. |       |
| 2. |       |
| 3. |       |
| 2. |  | 1. |       |
| 2. |       |
| 3. |       |
| 3. |  | 1. |       |
| 2. |       |
| 3. |       |
| 4. |  | 1. |       |
| 2. |       |
| 3. |       |
| 5. |  | 1. |       |
| 2. |       |
| 3. |       |
| Part 2: Data Collection and Problem Correction. Describe the processes for collecting data that are included in the evaluation design, including program-level data such as program activities and the number of participants served, and student-level academic data, including achievement results and attendance data. How are problems with project delivery to be identified and corrected throughout the project? Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
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| Schedule #16—Responses to Statutory Requirements |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Statutory Requirement 1:** The commissioner of education is required to establish and administer an early college education program for students who are at risk of dropping out of school or who wish to accelerate completion of the high school program. Describe how the school will address each of the following:* 1. provide for a course of study that enables a participating student to combine high school courses and college-level courses during grade levels 9 through 12;
	2. allow a participating student to complete high school and, on or before the fifth anniversary of the date of the student's first day of high school, receive a high school diploma and either an associate degree; or at least 60 semester credit hours toward a baccalaureate degree;
	3. include articulation agreements with colleges, universities, and technical schools in the state to provide a participating student access to postsecondary educational and training opportunities at a college, university, or technical school; and
	4. provide a participating student flexibility in class scheduling and academic mentoring (TEC §29.908(b)).

Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.  |
| Click and type here to enter response. |

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| Schedule #16—Responses to Statutory Requirements (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Statutory Requirement 1 (continued)** Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #17—Responses to TEA Program Requirements |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **TEA Program Requirement 1:** The applicant must identify, in partnership with its local workforce development board, high-demand occupations and programs of study that lead to these occupations. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #17—Responses to TEA Program Requirements (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **TEA Program Requirement 2:** The applicant must enter into an agreement with at least one industry partner, which may include one or more employers within an industry. Describe how the partner will commit to the following for the grant period:* 1. Serve as an active member of the INDUSTRY CLUSTER NAME Innovative Academy ECHS Leadership Team.
	2. Provide cash or in-kind contributions equal to 20-25% of the total grant award. Examples of in-kind contributions include costs associated with providing internships, externships, apprenticeship programs, mentors, equipment, or staff to assist with curriculum development to support relevant and frequent industry experiences for students enrolled in the INDUSTRY CLUSTER NAME Innovative Academy ECHS.
	3. Ensure a liaison that represents the industry partner(s) interacts directly and frequently with ECHS staff.
	4. Actively participate in the development of curriculum for the INDUSTRY CLUSTER NAME Innovative Academy ECHS in order to ensure that the curriculum is appropriately aligned to marketable skills in the identified high-demand occupations, and may include industry recognized credentialing as part of degree plan design.
	5. Assist in the development and implementation of industry experiences, including mentorship programs, internships, externships, and/or apprenticeships, that expose students to applied learning and real-world work activities in the identified high-demand occupation(s).

 Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #17—Responses to TEA Program Requirements (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **TEA Program Requirement 3:** The INDUSTRY CLUSTER NAME Innovative Academy ECHS must ensure that 100% of students have access to opportunities to participate in industry experiences, including marketable skills, detailed work activities, etc. Applicants must provide a detailed plan that describes the industry experiences that will be made available to all INDUSTRY CLUSTER NAME Innovative Academy ECHS students throughout the student’s high school career. The plan should build in rigor and responsibility as students progress through high school. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #17—Responses to TEA Program Requirements (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **TEA Program Requirement 4:** The INDUSTRY CLUSTER NAME Innovative Academy ECHS must employ a career counselor that serves only students of the INDUSTRY CLUSTER NAME Innovative Academy ECHS. Describe the responsibilities of the career counselor. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #17—Responses to TEA Program Requirements (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **TEA Program Requirement 5:** The INDUSTRY CLUSTER NAME Innovative Academy ECHS must describe at least one program of study that spans secondary and postsecondary education and includes an appropriate sequence of courses that are aligned with high-demand occupations identified by the INDUSTRY CLUSTER NAME Innovative Academy ECHS. Priority points may be awarded for describing multiple programs of study. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #17—Responses to TEA Program Requirements (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **TEA Program Requirement 6:** The applicant must provide a sample crosswalk that identifies postsecondary coursework that would be required of a student in the program of study to complete a bachelor’s degree from the partnering general academic teaching institution(s) within two-three years of graduating from high school. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #17—Responses to TEA Program Requirements (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **TEA Program Requirement 7:** The INDUSTRY CLUSTER NAME Innovative Academy ECHS must develop and maintain an ECHS Career Preparation Academy Leadership Team that meets regularly to address issues of curriculum, school design, and sustainability. The leadership team must consist of high-level personnel with decision-making authority who meet regularly and report to each member organization or entity. The leadership team must consist of the following:* 1. District: superintendent, associate superintendent of curriculum and instruction, or equivalent position, career and technical education director, and ECHS Career Preparation Academy principal or director
	2. Primary dual credit partner: university or college president, provost, dean of college of education, and ECHS liaison
	3. College or university partner: INDUSTRY CLUSTER NAME Innovative Academy ECHS liaison
	4. Industry Partner: INDUSTRY CLUSTER NAME Innovative Academy ECHS liaison

Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #17—Responses to TEA Program Requirements (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **TEA Program Requirement 8:** The applicant must describe a proposed sustainability plan to ensure that the school will continue to meet the goals of the INDUSTRY CLUSTER NAME Innovative Academy ECHS beyond period of the grant program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| Schedule #17—Responses to TEA Program Requirements (cont.) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **TEA Program Requirement 9: FOR NEW EARLY COLLEGE HIGH SCHOOLS ONLY –** The applicant must describe a school plan that serves grades 9 through 12 and targets and enrolls a majority of students who are at risk of dropping out of school (at risk, economically disadvantaged, English language learners, and first-generation college goers) or who wish to accelerate completion of the high school program, and attempts to serve no more than 100 students per grade level in grades 9-12. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. |
| Click and type here to enter response. |

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| [Schedule #18—Equitable Access and Participation](http://tea.texas.gov/Grants/Files/Instruction-18.pdf) |
| County-District Number or Vendor ID: XXXXXX | Amendment number (for amendments only):      |
| No Barriers |
| # | No Barriers | Students | Teachers | Others |
| 000 | The applicant assures that no barriers exist to equitable access and participation for any groups | [ ]  | [ ]  | [ ]  |
| Barrier: Gender-Specific Bias |
| # | Strategies for Gender-Specific Bias | Students | Teachers | Others |
| A01 | Expand opportunities for historically underrepresented groups to fully participate | [ ]  | [ ]  | [ ]  |
| A02 | Provide staff development on eliminating gender bias | [ ]  | [ ]  | [ ]  |
| A03 | Ensure strategies and materials used with students do not promote gender bias | [ ]  | [ ]  | [ ]  |
| A04 | Develop and implement a plan to eliminate existing discrimination and the effects of past discrimination on the basis of gender | [ ]  | [ ]  | [ ]  |
| A05 | Ensure compliance with the requirements in Title IX of the Education Amendments of 1972, which prohibits discrimination on the basis of gender | [ ]  | [ ]  | [ ]  |
| A06 | Ensure students and parents are fully informed of their rights and responsibilities with regard to participation in the program | [ ]  | [ ]  | [ ]  |
| A99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Cultural, Linguistic, or Economic Diversity |
| # | Strategies for Cultural, Linguistic, or Economic Diversity | Students | Teachers | Others |
| B01 | Provide program information/materials in home language | [ ]  | [ ]  | [ ]  |
| B02 | Provide interpreter/translator at program activities | [ ]  | [ ]  | [ ]  |
| B03 | Increase awareness and appreciation of cultural and linguistic diversity through a variety of activities, publications, etc. | [ ]  | [ ]  | [ ]  |
| B04 | Communicate to students, teachers, and other program beneficiaries an appreciation of students’ and families’ linguistic and cultural backgrounds | [ ]  | [ ]  | [ ]  |
| B05 | Develop/maintain community involvement/participation in program activities | [ ]  | [ ]  | [ ]  |
| B06 | Provide staff development on effective teaching strategies for diverse populations | [ ]  | [ ]  | [ ]  |
| B07 | Ensure staff development is sensitive to cultural and linguistic differences and communicates an appreciation for diversity | [ ]  | [ ]  | [ ]  |
| B08 | Seek technical assistance from education service center, technical assistance center, Title I, Part A school support team, or other provider | [ ]  | [ ]  | [ ]  |
| B09 | Provide parenting training | [ ]  | [ ]  | [ ]  |
| B10 | Provide a parent/family center | [ ]  | [ ]  | [ ]  |
| B11 | Involve parents from a variety of backgrounds in decision making | [ ]  | [ ]  | [ ]  |

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| [Schedule #18—Equitable Access and Participation](http://tea.texas.gov/Grants/Files/Instruction-18.pdf) (cont.)  |
| County-District Number or Vendor ID: XXXXXX | Amendment number (for amendments only):      |
| Barrier: Cultural, Linguistic, or Economic Diversity (cont.) |
| # | Strategies for Cultural, Linguistic, or Economic Diversity | Students | Teachers | Others |
| B12 | Offer “flexible” opportunities for parent involvement including home learning activities and other activities that don’t require parents to come to the school | [ ]  | [ ]  | [ ]  |
| B13 | Provide child care for parents participating in school activities | [ ]  | [ ]  | [ ]  |
| B14 | Acknowledge and include family members’ diverse skills, talents, and knowledge in school activities | [ ]  | [ ]  | [ ]  |
| B15 | Provide adult education, including GED and/or ESL classes, or family literacy program | [ ]  | [ ]  | [ ]  |
| B16 | Offer computer literacy courses for parents and other program beneficiaries | [ ]  | [ ]  | [ ]  |
| B17 | Conduct an outreach program for traditionally “hard to reach” parents | [ ]  | [ ]  | [ ]  |
| B18 | Coordinate with community centers/programs | [ ]  | [ ]  | [ ]  |
| B19 | Seek collaboration/assistance from business, industry, or institutions of higher education | [ ]  | [ ]  | [ ]  |
| B20 | Develop and implement a plan to eliminate existing discrimination and the effects of past discrimination on the basis of race, national origin, and color | [ ]  | [ ]  | [ ]  |
| B21 | Ensure compliance with the requirements in Title VI of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, national origin, and color | [ ]  | [ ]  | [ ]  |
| B22 | Ensure students, teachers, and other program beneficiaries are informed of their rights and responsibilities with regard to participation in the program | [ ]  | [ ]  | [ ]  |
| B23 | Provide mediation training on a regular basis to assist in resolving disputes and complaints | [ ]  | [ ]  | [ ]  |
| B99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Gang-Related Activities |
| # | Strategies for Gang-Related Activities | Students | Teachers | Others |
| C01 | Provide early intervention | [ ]  | [ ]  | [ ]  |
| C02 | Provide counseling | [ ]  | [ ]  | [ ]  |
| C03 | Conduct home visits by staff | [ ]  | [ ]  | [ ]  |
| C04 | Provide flexibility in scheduling activities | [ ]  | [ ]  | [ ]  |
| C05 | Recruit volunteers to assist in promoting gang-free communities | [ ]  | [ ]  | [ ]  |
| C06 | Provide mentor program | [ ]  | [ ]  | [ ]  |
| C07 | Provide before/after school recreational, instructional, cultural, or artistic programs/activities | [ ]  | [ ]  | [ ]  |

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| [Schedule #18—Equitable Access and Participation](http://tea.texas.gov/Grants/Files/Instruction-18.pdf) (cont.)  |
| County-District Number or Vendor ID: XXXXXX | Amendment number (for amendments only):      |
| Barrier: Gang-Related Activities (cont.) |
| # | Strategies for Gang-Related Activities | Students | Teachers | Others |
| C08 | Provide community service programs/activities | [ ]  | [ ]  | [ ]  |
| C09 | Conduct parent/teacher conferences | [ ]  | [ ]  | [ ]  |
| C10 | Strengthen school/parent compacts | [ ]  | [ ]  | [ ]  |
| C11 | Establish collaborations with law enforcement agencies | [ ]  | [ ]  | [ ]  |
| C12 | Provide conflict resolution/peer mediation strategies/programs | [ ]  | [ ]  | [ ]  |
| C13 | Seek collaboration/assistance from business, industry, or institutions of higher education | [ ]  | [ ]  | [ ]  |
| C14 | Provide training/information to teachers, school staff, and parents to deal with gang-related issues | [ ]  | [ ]  | [ ]  |
| C99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Drug-Related Activities |
| # | Strategies for Drug-Related Activities | Students | Teachers | Others |
| D01 | Provide early identification/intervention | [ ]  | [ ]  | [ ]  |
| D02 | Provide counseling | [ ]  | [ ]  | [ ]  |
| D03 | Conduct home visits by staff | [ ]  | [ ]  | [ ]  |
| D04 | Recruit volunteers to assist in promoting drug-free schools and communities | [ ]  | [ ]  | [ ]  |
| D05 | Provide mentor program | [ ]  | [ ]  | [ ]  |
| D06 | Provide before/after school recreational, instructional, cultural, or artistic programs/activities | [ ]  | [ ]  | [ ]  |
| D07 | Provide community service programs/activities | [ ]  | [ ]  | [ ]  |
| D08 | Provide comprehensive health education programs | [ ]  | [ ]  | [ ]  |
| D09 | Conduct parent/teacher conferences | [ ]  | [ ]  | [ ]  |
| D10 | Establish school/parent compacts | [ ]  | [ ]  | [ ]  |
| D11 | Develop/maintain community collaborations | [ ]  | [ ]  | [ ]  |
| D12 | Provide conflict resolution/peer mediation strategies/programs | [ ]  | [ ]  | [ ]  |
| D13 | Seek collaboration/assistance from business, industry, or institutions of higher education | [ ]  | [ ]  | [ ]  |
| D14 | Provide training/information to teachers, school staff, and parents to deal with drug-related issues | [ ]  | [ ]  | [ ]  |
| D99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Visual Impairments |
| # | Strategies for Visual Impairments | Students | Teachers | Others |
| E01 | Provide early identification and intervention | [ ]  | [ ]  | [ ]  |
| E02 | Provide program materials/information in Braille | [ ]  | [ ]  | [ ]  |

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| [Schedule #18—Equitable Access and Participation](http://tea.texas.gov/Grants/Files/Instruction-18.pdf) (cont.)  |
| County-District Number or Vendor ID: XXXXXX | Amendment number (for amendments only):      |
| Barrier: Visual Impairments |
| # | Strategies for Visual Impairments | Students | Teachers | Others |
| E03 | Provide program materials/information in large type | [ ]  | [ ]  | [ ]  |
| E04 | Provide program materials/information in digital/audio formats | [ ]  | [ ]  | [ ]  |
| E05 | Provide staff development on effective teaching strategies for visual impairment | [ ]  | [ ]  | [ ]  |
| E06 | Provide training for parents | [ ]  | [ ]  | [ ]  |
| E07 | Format materials/information published on the internet for ADA accessibility | [ ]  | [ ]  | [ ]  |
| E99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Hearing Impairments  |
| # | Strategies for Hearing Impairments |  |  |  |
| F01 | Provide early identification and intervention | [ ]  | [ ]  | [ ]  |
| F02 | Provide interpreters at program activities | [ ]  | [ ]  | [ ]  |
| F03 | Provide captioned video material | [ ]  | [ ]  | [ ]  |
| F04 | Provide program materials and information in visual format | [ ]  | [ ]  | [ ]  |
| F05 | Use communication technology, such as TDD/relay | [ ]  | [ ]  | [ ]  |
| F06 | Provide staff development on effective teaching strategies for hearing impairment | [ ]  | [ ]  | [ ]  |
| F07 | Provide training for parents | [ ]  | [ ]  | [ ]  |
| F99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Learning Disabilities |
| # | Strategies for Learning Disabilities | Students | Teachers | Others |
| G01 | Provide early identification and intervention | [ ]  | [ ]  | [ ]  |
| G02 | Expand tutorial/mentor programs | [ ]  | [ ]  | [ ]  |
| G03 | Provide staff development in identification practices and effective teaching strategies | [ ]  | [ ]  | [ ]  |
| G04 | Provide training for parents in early identification and intervention | [ ]  | [ ]  | [ ]  |
| G99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Other Physical Disabilities or Constraints |
| # | Strategies for Other Physical Disabilities or Constraints | Students | Teachers | Others |
| H01 | Develop and implement a plan to achieve full participation by students with other physical disabilities or constraints | [ ]  | [ ]  | [ ]  |
| H02 | Provide staff development on effective teaching strategies | [ ] [ ]  | [ ] [ ]  | [ ] [ ]  |
| H03 | Provide training for parents | [ ] [ ]  | [ ] [ ]  | [ ] [ ]  |
| H99 | Other (specify) | [ ]  | [ ]  | [ ]  |

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| [Schedule #18—Equitable Access and Participation](http://tea.texas.gov/Grants/Files/Instruction-18.pdf) (cont.)  |
| County-District Number or Vendor ID: XXXXXX | Amendment number (for amendments only):      |
| Barrier: Inaccessible Physical Structures |
| # | Strategies for Inaccessible Physical Structures | Students | Teachers | Others |
| J01 | Develop and implement a plan to achieve full participation by students with other physical disabilities/constraints | [ ]  | [ ]  | [ ]  |
| J02 | Ensure all physical structures are accessible | [ ]  | [ ]  | [ ]  |
| J99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Absenteeism/Truancy |
| # | Strategies for Absenteeism/Truancy | Students | Teachers | Others |
| K01 | Provide early identification/intervention | [ ]  | [ ]  | [ ]  |
| K02 | Develop and implement a truancy intervention plan | [ ]  | [ ]  | [ ]  |
| K03 | Conduct home visits by staff | [ ]  | [ ]  | [ ]  |
| K04 | Recruit volunteers to assist in promoting school attendance | [ ]  | [ ]  | [ ]  |
| K05 | Provide mentor program | [ ]  | [ ]  | [ ]  |
| K06 | Provide before/after school recreational or educational activities | [ ]  | [ ]  | [ ]  |
| K07 | Conduct parent/teacher conferences | [ ]  | [ ]  | [ ]  |
| K08 | Strengthen school/parent compacts | [ ]  | [ ]  | [ ]  |
| K09 | Develop/maintain community collaborations | [ ]  | [ ]  | [ ]  |
| K10 | Coordinate with health and social services agencies | [ ]  | [ ]  | [ ]  |
| K11 | Coordinate with the juvenile justice system | [ ]  | [ ]  | [ ]  |
| K12 | Seek collaboration/assistance from business, industry, or institutions of higher education | [ ]  | [ ]  | [ ]  |
| K99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: High Mobility Rates |
| # | Strategies for High Mobility Rates | Students | Teachers | Others |
| L01 | Coordinate with social services agencies | [ ]  | [ ]  | [ ]  |
| L02 | Establish collaborations with parents of highly mobile families | [ ]  | [ ]  | [ ]  |
| L03 | Establish/maintain timely record transfer system | [ ]  | [ ]  | [ ]  |
| L99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Lack of Support from Parents |
| # | Strategies for Lack of Support from Parents | Students | Teachers | Others |
| M01 | Develop and implement a plan to increase support from parents | [ ]  | [ ]  | [ ]  |
| M02 | Conduct home visits by staff | [ ]  | [ ]  | [ ]  |

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| [Schedule #18—Equitable Access and Participation](http://tea.texas.gov/Grants/Files/Instruction-18.pdf) (cont.)  |
| County-District Number or Vendor ID: XXXXXX | Amendment number (for amendments only):      |
| Barrier: Lack of Support from Parents (cont.) |
| # | Strategies for Lack of Support from Parents | Students | Teachers | Others |
| M03 | Recruit volunteers to actively participate in school activities | [ ]  | [ ]  | [ ]  |
| M04 | Conduct parent/teacher conferences | [ ]  | [ ]  | [ ]  |
| M05 | Establish school/parent compacts | [ ]  | [ ]  | [ ]  |
| M06 | Provide parenting training | [ ]  | [ ]  | [ ]  |
| M07 | Provide a parent/family center | [ ]  | [ ]  | [ ]  |
| M08 | Provide program materials/information in home language | [ ]  | [ ]  | [ ]  |
| M09 | Involve parents from a variety of backgrounds in school decision making | [ ]  | [ ]  | [ ]  |
| M10 | Offer “flexible” opportunities for involvement, including home learning activities and other activities that don’t require coming to school | [ ]  | [ ]  | [ ]  |
| M11 | Provide child care for parents participating in school activities | [ ]  | [ ]  | [ ]  |
| M12 | Acknowledge and include family members’ diverse skills, talents, and knowledge in school activities | [ ]  | [ ]  | [ ]  |
| M13 | Provide adult education, including GED and/or ESL classes, or family literacy program | [ ]  | [ ]  | [ ]  |
| M14 | Conduct an outreach program for traditionally “hard to reach” parents | [ ]  | [ ]  | [ ]  |
| M15 | Facilitate school health advisory councils four times a year | [ ]  | [ ]  | [ ]  |
| M99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Shortage of Qualified Personnel |
| # | Strategies for Shortage of Qualified Personnel | Students | Teachers | Others |
| N01 | Develop and implement a plan to recruit and retain qualified personnel | [ ]  | [ ]  | [ ]  |
| N02 | Recruit and retain personnel from a variety of racial, ethnic, and language minority groups | [ ]  | [ ]  | [ ]  |
| N03 | Provide mentor program for new personnel | [ ]  | [ ]  | [ ]  |
| N04 | Provide intern program for new personnel | [ ]  | [ ]  | [ ]  |
| N05 | Provide an induction program for new personnel | [ ]  | [ ]  | [ ]  |
| N06 | Provide professional development in a variety of formats for personnel | [ ]  | [ ]  | [ ]  |
| N07 | Collaborate with colleges/universities with teacher preparation programs | [ ]  | [ ]  | [ ]  |
| N99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Lack of Knowledge Regarding Program Benefits |
| # | Strategies for Lack of Knowledge Regarding Program Benefits | Students | Teachers | Others |
| P01 | Develop and implement a plan to inform program beneficiaries of program activities and benefits | [ ]  | [ ]  | [ ]  |
| P02 | Publish newsletter/brochures to inform program beneficiaries of activities and benefits | [ ]  | [ ]  | [ ]  |

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| [Schedule #18—Equitable Access and Participation](http://tea.texas.gov/Grants/Files/Instruction-18.pdf) (cont.)  |
| County-District Number or Vendor ID: XXXXXX | Amendment number (for amendments only):      |
| Barrier: Lack of Knowledge Regarding Program Benefits (cont.) |
| # | Strategies for Lack of Knowledge Regarding Program Benefits | Students | Teachers | Others |
| P03 | Provide announcements to local radio stations, newspapers, and appropriate electronic media about program activities/benefits | [ ]  | [ ]  | [ ]  |
| P99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Lack of Transportation to Program Activities |
| # | Strategies for Lack of Transportation | Students | Teachers | Others |
| Q01 | Provide transportation for parents and other program beneficiaries to activities | [ ]  | [ ]  | [ ]  |
| Q02 | Offer “flexible” opportunities for involvement, including home learning activities and other activities that don’t require coming to school | [ ]  | [ ]  | [ ]  |
| Q03 | Conduct program activities in community centers and other neighborhood locations | [ ]  | [ ]  | [ ]  |
| Q99 | Other (specify) | [ ]  | [ ]  | [ ]  |
| Barrier: Other Barriers |
| # | Strategies for Other Barriers | Students | Teachers | Others |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |
| Z99 | Other barrier | [ ]  | [ ]  | [ ]  |
| Other strategy |

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| [Schedule #20—Outside Sources of Income and Pre-Existing Content](http://tea.texas.gov/Grants/Files/Instructions-20_OutsideSourcesPreExisting.pdf) |
| County-district number or vendor ID:       | Amendment # (for amendments only):      |
| **Part 1: Outside Sources of Income.** Report any non-TEA income used to support or develop the identified TEA-funded project if the content, products, or materials created using grant funds are to be commercialized. **NOTE:** The grand total from this part of this schedule does not transfer to Schedule #6—Program Budget Summary.  |
| [ ] [ ]  Not applicable. The contents, products, and/or materials created using grant funds will not be commercialized. (If in the future it is determined that the content, products, and/or materials will be commercialized, the IHE applicant must contact the Division of Grants Administration at grants@tea.texas.gov).  |
| # | Grantor | Grant Period | Amount |
| 1 |  |  | $      |
| 2 |  |  | $      |
| 3 |  |  | $      |
| 4 |  |  | $      |
| 5 | **Total:** | $      |
| Part 2: Pre-Existing Content. On this part of the schedule, list by title all items of pre-existing content that were not funded with TEA funds.The provisions of any and all memoranda of understanding between TEA and the IHE applicant regarding copyrights in works created by the IHE applicant, and/or its component institutions, with TEA funding, are incorporated herein.  |
| [ ] [ ]  Not applicable. No product, document, or content existed prior to receipt of grant funds from TEA. |
| # | Title | Date Developed |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 |  |  |
| 10 |  |  |