|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 2015–2016 Title III, Part A – ELA: Formula Grants for Unaccompanied Children and Youth | | | | | | | | | | | | | | | |
| **Program authority:** | P.L. 113-235 III Elementary and Secondary Education Act, as amended | | | | | | | | | | | | **FOR TEA USE ONLY** Write NOGA ID here: | | |
| **Grant Period** | December 21, 2015, to September 30, 2016. Pre-award costs are permitted from June 1, 2015, to stamp-in date. | | | | | | | | | | | |  | | |
| **Application deadline:** | 5:00 p.m. Central Time, January 5, 2016 | | | | | | | | | | | | Place date stamp here. | | |
| **Submittal information:** | **Three** complete copies of the application, at least one with an original signature (blue ink preferred), must be received no later than the aforementioned time and date at this address:  Document Control Center, Division of Grants Administration Texas Education Agency 1701 North Congress Ave Austin, TX 78701-1494 | | | | | | | | | | | |  | | |
| **Contact information:** | Susie Coultress: susie.coultress@tea.texas.gov;  (512) 463-9581 | | | | | | | | | | | |  | | |
| [Schedule #1—General Information](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=2147506984) | | | | | | | | | | | | | | | |
| Part 1: Applicant Information | | | | | | | | | | | | | | | |
| Organization name | | County-District # | | | | |  | | | | | | | 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://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=2147506984) | | | | | | | | | | | | | | | |
| 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.

|  |  |  |  |
| --- | --- | --- | --- |
| Schedule # | Schedule Name | Application Type | |
| New | Amended |
| 1 | General Information |  |  |
| 2 | Required Attachments and Provisions and Assurances |  | N/A |
| 4 | Request for Amendment | N/A |  |
| 5 | Program Executive Summary |  |  |
| 6 | Program Budget Summary |  |  |
| 7 | Payroll Costs (6100) |  |  |
| 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 |  |  |
| 13 | Needs Assessment |  |  |
| 15 | Project Evaluation |  |  |
| 16 | Responses to Statutory Requirements |  |  |
| 18 | Equitable Access and Participation |  |  |
| 19 | Private Nonprofit School Participation |  |  |

|  |  |
| --- | --- |
| [Schedule #2—Required Attachments and Provisions and Assurances](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=2147506985) | |
| 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).

|  |  |  |
| --- | --- | --- |
| # | Applicant Type | Name of Required Fiscal-Related Attachment |
| No fiscal-related attachments are required for this grant. | | |
| # | Name of Required Program-Related Attachment | Description of Required Program-Related Attachment |
| No program-related attachments are required for this grant. | | |
| 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.**

|  |  |
| --- | --- |
| 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. |

|  |  |  |
| --- | --- | --- |
| [Schedule #2—Required Attachments and Provisions and Assurances](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=2147506985) | | |
| 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 the program funds will benefit only immigrant and unaccompanied children and youth in order to meet the purpose of this grant program, the Title III, Part A – ELA: Formula Grants for Unaccompanied Children and Youth. | |

|  |  |
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| [Schedule #4—Request for Amendment](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=2147506986) | |
| 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.

|  |
| --- |
| 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.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 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: | | $ | $ | $ | $ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [Schedule #4—Request for Amendment](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=2147506986) (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. |  |  |  | |

|  |  |  |
| --- | --- | --- |
| [Schedule #5—Program Executive Summary](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=2147507204) | | |
| 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. | | |
| [Schedule #5—Program Executive Summary (cont.)](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=2147507204) | | |
| 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://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805636) | | | | | | | |
| County-district number or vendor ID: | | | | Amendment # (for amendments only): | | | |
| Program authority: P.L. 113-235 III Elementary and Secondary Education Act, as amended | | | | | | | |
| Grant Period: December 21, 2015, to September 30, 2016. Pre-award costs are permitted from June 1, 2015, to stamp-in date. | | | Fund code: 263 | | | | |
| **Budget Summary** | | | | | | | |
| Schedule # | Title | Class/ Object Code | Program Cost | |  |  | Pre-Award Cost |
| 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 | |  |  | N/A |
| Grand total of budgeted costs (add all entries in each column): | | | **$** | |  |  | $ |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| [Schedule #7—Payroll Costs (6100)](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805637) | | | | | | | |
| 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 | Pre-Award |
| 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 | | | | $ | $ |
| 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/WorkArea/DownloadAsset.aspx?id=25769819588) | | | | | | |
| 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 | Pre-Award |
| 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 | Pre-Award |
| 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.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [Schedule #9—Supplies and Materials (6300)](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805640) | | | | |
| County-District Number or Vendor ID: | | Amendment number (for amendments only): | | |
| **Expense Item Description** | | | **Grant Amount Budgeted** | **Pre-Award** |
| 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.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| [Schedule #10—Other Operating Costs (6400)](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805641) | | | | |
| County-District Number or Vendor ID: | | Amendment number (for amendments only): | | |
| Expense Item Description | | | Grant Amount Budgeted | Pre-Award |
| 6411 | Out-of-state travel for employees. Must be allowable per Program Guidelines and must attach Out-of-State Travel Justification Form. | | $ | $ |
| 6412 | Travel for students to conferences (does not include field trips). Requires authorization in writing from the federal awarding agency. By certifying and submitting this application, the authorized official certifies that authorization is on file. | | $ | $ |
| 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 from the federal awarding agency. By certifying and submitting this application, the authorized official certifies that authorization is on file. | | $ | $ |
| 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.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| [Schedule #11—Capital Outlay (6600)](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805642) | | | | | | |
| County-District Number or Vendor ID: | | | Amendment number (for amendments only): | | | |
| # | Description and Purpose | Quantity | | Unit Cost | Grant Amount Budgeted | Pre-Award |
| 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.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 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 enrollment: | | | |  | | | |
| Category | Number | | Percentage | Category | | | Percentage |
| African American | N/A | | N/A% | Attendance rate | | | N/A% |
| Hispanic | N/A | | N/A% | Annual dropout rate (Gr 9-12) | | | N/A% |
| White | N/A | | N/A% | Students taking the ACT and/or SAT | | | N/A% |
| Asian | N/A | | N/A% | Average SAT score (number value, not a percentage) | | | N/A |
| Economically disadvantaged | N/A | | N/A% | Average ACT score (number value, not a percentage) | | | N/A |
| Limited English proficient (LEP) | N/A | | N/A% |  | | |  |
| Disciplinary placements | N/A | | N/A% |  | | |  |
| Immigrant |  | | % |  | | |  |
| 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 #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:** Family literacy, parent outreach and training activities designed to assist parents to become active participants in the education of their children. 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 2:** Support for personnel, including teacher aides who have been specifically trained or are being trained to provide services to immigrant children and youth. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. | |
| Click and type here to enter response. | |
| **Statutory Requirement 3:** Provision of tutorials, mentoring, and academic or career counseling for immigrant children and youth. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. | |
| Click and type here to enter response. | |
| Schedule #16—Responses to Statutory Requirements (cont.) | |
| County-district number or vendor ID: | County-district number or vendor ID: |
| **Statutory Requirement 4:** Identification and acquisition of curricular materials, educational software, and technologies to be used in the program to be carried out with the funds. 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 5:** Basic instruction services that are directly attributable to the presence in the school district involved of immigrant children and youth, including the payment of costs of providing additional classroom supplies, costs of transportation, or such other costs as are directly attributable to such additional basic instruction services. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point. | |
| Click and type here to enter response. | |
| **Statutory Requirement 6:** Other instruction services designed to assist immigrant children and youth to achieve in elementary and secondary schools in the United States, such as programs of introduction to the educational system and civics education. 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 7:** Activities coordinated with community-based organizations, institutions of higher education, private sector entities, or other entities with expertise working with immigrants, to assist parents of immigrant children and youth by offering comprehensive community services. 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://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805645) | | | | | |
| County-District Number or Vendor ID: | | 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://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805645) (cont.) | | | | | |
| County-District Number or Vendor ID: | | 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://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805645) (cont.) | | | | | |
| County-District Number or Vendor ID: | | 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://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805645) (cont.) | | | | | |
| County-District Number or Vendor ID: | | 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://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805645) (cont.) | | | | | |
| County-District Number or Vendor ID: | | 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://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805645) (cont.) | | | | | |
| County-District Number or Vendor ID: | | 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://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805645) (cont.) | | | | | | | |
| County-District Number or Vendor ID: | | 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 #19—Private Nonprofit School Participation](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805646) | | | | | |
| County-District Number or Vendor ID: | | | Amendment number (for amendments only): | | |
| Part 1: Private Nonprofit School Contacts. This part is required regardless of whether any private nonprofit schools are participating in the program. For *statewide* teacher training programs or *statewide* student instructional programs, refer to the list of private nonprofit school association contacts posted on the [Applying for a Grant](http://www.tea.texas.gov/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=25769814277) page. | | | | | |
| Total Nonprofit Schools within Boundary | | | | | |
| Enter total number of private nonprofit schools within applicant’s boundary (enter “0” if none): | | | | | |
| Initial Phase Contact Methods | | | | | |
| Required if any nonprofit schools are within boundary: Check the appropriate box below to indicate initial phase contact method. | | | | | |
| Certified letter | Documented phone calls | | | Meetings | |
| Fax | Email | | | Other method (specify): | |
| Total Eligible Nonprofit Students within Boundary | | | | | |
| Enter total number of eligible private nonprofit students within applicant’s boundary (enter “0” if none): | | | | | |
| Check box only if there is no data available to determine the number of eligible students: | | | | | |
| Total Nonprofit Participants | | | | | |
| Total nonprofit schools participating: | | Total nonprofit students participating: | | | Total nonprofit teachers participating: |
| No nonprofit schools participating: | | No nonprofit students participating: | | | No nonprofit teachers participating: |
| Part 2: Consultation and Services. Remainder of schedule, Parts 2, 3, and 4, are required *only* if private nonprofit schools are participating. | | | | | |
| Participant Consultation: Development and Design Phase Consultation Methods | | | | | |
| Check the appropriate boxes to indicate development and design phase contact methods. | | | | | |
| Certified letter | | Documented phone calls | | | Meetings |
| Fax | | Email | | | Other (specify): |
| Requirements Considered Per No Child Left Behind Act of 2001 (P.L. 107-110), Section 9501 (c) | | | | | |
| How children’s needs will be identified | | | | | |
| What services will be offered | | | | | |
| How, where, and by whom the services will be provided | | | | | |
| How the services will be academically assessed, and how the results of that assessment will be used to improve those services | | | | | |
| The size and scope of the equitable services to be provided to the eligible private nonprofit school children, and the proportion of funds that is allocated under subsection (a)(4) for such services | | | | | |
| The methods or sources of data that are used under subsection (c) and section 1113(c)(1) to determine the number of children from low-income families in participating school attendance areas who attend private nonprofit schools | | | | | |
| How and when the organization will make decisions about the delivery of services to such children, including a thorough consideration and analysis of the views of the private nonprofit school officials on the provision of services through a contract with potential third-party providers | | | | | |
| How, if the organization disagrees with the views of the private nonprofit school officials on the provision of services through a contract, the organization will provide in writing to these officials an analysis of the reasons why the organization has chosen not to use a contractor | | | | | |
| Other (specify): | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| [Schedule #19—Private Nonprofit School Participation](http://www.tea.state.tx.us/WorkArea/DownloadAsset.aspx?id=25769805646) (cont.) | | | | | | | | | | | | |
| County-District Number or Vendor ID: | | | | | | | | Amendment number (for amendments only): | | | | |
| Part 3: Services and Benefits Delivery | | | | | | | | | | | | |
| Designated Places/Sites | | | | | | | | | | | | |
| Public school | | | | Private nonprofit school | | | | | | Neutral site | | |
| Other (specify): | | | | | | | | | | | | |
| Designated Times | | | | | | | | | | | | |
| Regular school day | | | | Before school day | | | | | | After school day | | |
| Summer vacation | | | | Other (specify): | | | | | | | | |
| Part 4: Selection Criteria/Activity Timeline | | | | | | | | | | | | |
| # | | Private Nonprofit School Name/  Number of Students and Teachers | | | Selection Criteria | | | | Major Activities | | Activity Begin/  End Date |
| 1 | | School name: | | | Activity #1 selection criteria | | | | Activity #1 major activities | | Activity #1 begin date |
| # of students: | # of teachers: | | Activity #1 end date |
| 2 | | School name: | | | Activity #2 selection criteria | | | | Activity #2 major activities | | Activity #2 begin date |
| # of students: | # of teachers: | | Activity #2 end date |
| 3 | | School name: | | | Activity #3 selection criteria | | | | Activity #3 major activities | | Activity #3 begin date |
| # of students: | # of teachers: | | Activity #3 end date |
| 4 | | School name: | | | Activity #4 selection criteria | | | | Activity #4 major activities | | Activity #4 begin date |
| # of students: | # of teachers: | | Activity #4 end date |
| 5 | | School name: | | | Activity #5 selection criteria | | | | Activity #5 major activities | | Activity #5 begin date |
| # of students: | # of teachers: | | Activity #5 end date |
| Part 5: Differences in Program Benefits Provided to Public and Private Schools | | | | | | | | | | | | | | |
| Select the one appropriate box below.  There are no differences between the program benefits provided to the public school students and the private school students.  There are differences in program benefits to be provided to the public school students and the private school students. (Describe the differences and the reasons for the differences in the space provide below.) | | | | | | | | | | | | | | |
| Description of Difference in Benefits | | | | | | Reason for the Difference in Benefits | | | | | | | | |
| 1 |  | | | | | 1 |  | | | | | | |
| 2 |  | | | | | 2 |  | | | | | | |
| 3 |  | | | | | 3 |  | | | | | | |
| 4 |  | | | | | 4 |  | | | | | | |
| 5 |  | | | | | 5 |  | | | | | | |