

This LOI application must be submitted via email to loiapplications @	Application stamp-in date and time Image: Contract of the stamp
The LOI application may be signed with a digital ID or it may be signe are acceptable.	d by hand. Both forms of signature
TEA must receive the application by 11:59 p.m. CT, March 24, 2023 .	
Grant period from September 1, 2023 - Au	ugust 31, 2025
Pre-award costs permitted from Not P	Permitted
Required Attachments	

1. Excel workbook with the grant's budget schedules (linked along with this form on the TEA Grants Opportunities page)

Amendment Number									
Amendment number (For amendments only; enter N/A when completing this form to apply for grant funds):									
Applicant Information									
Organization			Campus			ESC	UEI		
Address		City			ZIP		Vendor II	>	
Primary Contact	Email						Phone		
Secondary Contact	Email [Phone		
Certification and Incorporation I understand that this application constitutes an offer and, if accepted by TEA or renegotiated to acceptance, will form a binding agreement. 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 certify that any compliance with all applicable federal and state	-			vity wi	ll be cor	nducted	in accordar	ice and	
I further certify my acceptance of the requirements conveyed in the following portions of the LOI application, as applicable, and that these documents are incorporated by reference as part of the LOI application and Notice of Grant Award (NOGA):									
LOI application, guidelines, and instructions] Deb	arment	and Sus	pension Ce	rtification	
General and application-specific Provisions and Assurances									
Authorized Official Name				Title					
Email					Phone				
Signature Tanya Larkin						Date			
RFA # 701-23-110 SAS # 701A-24 2023-	·2025 Til	tle I Pai	rent and Fa	amily I	Engagei	ment Ini	itiative	Page	1 of 9

CDN Vendor ID	Amendment #
Shared Services Arrangements	
Shared services arrangements (SSAs) ar	e NOT permitted for this grant.
Statutory/Program Assurances	
The following assurances apply to this prog comply with these assurances.	ram. In order to meet the requirements of the program, the applicant must
(replace) state mandates, State Board of applicant provides assurance that state because of the availability of these fund	program funds will supplement (increase the level of service), and not supplant Education rules, and activities previously conducted with state or local funds. The or local funds may not be decreased or diverted for other purposes merely s. The applicant provides assurance that program services and activities to be tary to existing services and activities and will not be used for any services or
— ·· ·	the application does not contain any information that would be protected by the ct (FERPA) from general release to the public.
3. The applicant provides assurance to a 2023-2025 Title I Parent and Family Enga	dhere to all the Statutory and TEA Program requirements as noted in the agement Initiative Program Guidelines.

☐ 4. The applicant provides assurance to adhere to all the Performance Measures, as noted in the 2023-2025 Title I Parent and Family Engagement Initiative Program Guidelines, and shall provide to TEA, upon request, any performance data necessary to assess the success of the program.

5. The applicant provides assurance that they accept and will comply with <u>Every Student Succeeds Act Provisions and</u> <u>Assurances requirements.</u>

□ 6. The applicant assures that any Electronic Information Resources (EIR) produced as part of this agreement will comply with the State of Texas Accessibility requirements as specified in 1 TAC 206, 1 TAC Chapter 213, Federal Section 508 standards, and the WCAG 2.0 AA Accessibility Guidelines.

CDN Vendor ID Amendn	nent #

Summary of Program

Provide an overview of the program to be implemented with grant funds. Include the overall mission and specific needs of the organization. Describe how the program will address the mission and needs.

Qualifications and Experience for Key Personnel

Outline the required qualifications and experience for primary project personnel and any external consultants projected to be involved in the implementation and delivery of the program. Include whether the position is existing or proposed.

Title and Responsibilities of Position

RFA # 701-23-110 SAS # 701A-24

Required Qualifications and Experience

2023-2025 Title I Parent and Family Engagement Initiative

Goals, Objectives, and Strategies

Describe the major goals/objectives of the proposed program. What activities/strategies will be implemented to meet those goals/objectives?

Performance and Evaluation Measures

Describe the performance measures identified for this program which are related to student outcomes and are consistent with the purpose of the program. Include the tools used to measure performance, as well as the processes that will be used to ensure the effectiveness of project objectives and strategies.

CDN	Vendor ID	Amendment #	

Budget Narrative

Describe how the proposed budget will meet the needs and goals of the program, including for staffing, supplies and materials, contracts, travel, etc. If applicable, include a high-level snapshot of funds currently allocated to similar programs. Include a short narrative describing how adjustments will be made in the future to meet needs.

CDN Vendor ID Amendmer	Statutor	ry/Program Requirer	
	CDN	Vendor ID	Amendment #

1. Provide a description of plan to fund a minimum of 3.5 FTEs from initiative funds to carry out the work of the initiative.

2. Provide a description of plan to fund a minimum of 1 FTE from initiative funds to coordinate the work of the initiative and carry out initiative responsibilities.

CDN Vendor ID	Amendment #
Statutory/Program Requirements (Cont	t.)
3. Provide examples of trainings and resou	rce documents the initiative could develop to provide to ESCs and LEAs.

CDN	Vendor ID			Amendment #
Equitable A	ccess and P	articipation		
				any barriers exist to equitable access and participation for any groups
		d by this program		
_ The ap	plicant assure	es that no barriers	exist to e	quitable access and participation for any groups receiving services
	d by this prog			
Barrier	s exist to equi	table access and p	articipati	on for the following groups receiving services funded by this grant, as
[⊖] descri⊧	oed below.			
Group			Barrier	
Group			Barrier	
			_	
Group			Barrier	
Group			Barrier	

