

#### 2019-2020 Perkins Reserve Grant

**COMPETITIVE GRANT Application Due 5:00 p.m. CT, February 14, 2019** 

**Authorizing Legislation** 

Carl D. Perkins Career and Technical Education Act of 2006, P.L. 109-270, Title I, Part C, §112(a)(1)

Applicants must submit one original copy of the application **and** two copies of the application (for a **total of three copies of the application**). All three copies of the application MUST bear the signature of a person authorized to bind the applicant to a contractual agreement. **Applications <u>cannot</u> be emailed.** Applications must be received no later than the above-listed application due date and time at:

Document Control Center, Grants Administration Division

Texas Education Agency 1701 N. Congress Avenue Austin, TX 78701-1494

Grant period from

July 1, 2019 - August 31, 2020

X Pre-award costs are not permitted.

# **Required Attachments**

No attachments are required to be submitted with this application.

A	mend	ment N	lumi	oer

Amendment Number (For amendments only; enter N/A when completing this form to apply for grant funds):

#### **Applicant Information** Organization|Willis ISD CDN 170904 ESC 06 DUNS 100077205 Vendor ID 1746002568 City |Willis 77378 Phone 936-856-1200 Address 204 W Rogers Phone 936-890-7411 Primary Contact Travis Utecht Email tutecht@willisisd.org Phone 936-856-1214 Secondary Contact Brian Greeney Email bgreeney@willisisd.org

#### **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 ensuing program and activity will be conducted in accordance and compliance with all applicable federal and state laws and regulations.

I further certify my acceptance of the requirements conveyed in the following portions of the grant application, as applicable, and that these documents are incorporated by reference as part of the grant application and Notice of Grant Award (NOGA):

- □ Grant application, guidelines, and instructions
- **⊠** General Provisions and Assurances
- □ Application-specific Provisions and Assurances
- □ Debarment and Suspension Certification

Authorized Official Name Brian Greeney Title Asst. Supt. of Innovation, Teaching & Learn

Email bgreeney@willisisd.org Phone 936-856-1214

Signature Bey Date 2/1/19

Grant Writer Name Travis Utecht Signature Travis Utecht Date 2/1/19

**⊙** Grant writer is an employee of the applicant organization.
C Grant writer is not an employee of the applicant organization.

RFA # 701-19-104 SAS # 424-20 2019–2020 Perkins Reserve Grant Page 1 of 15

2019 -A19 21 X

701-19-104-004

Application stamp-in date and time

	ation is the fiscal agent of a planned SSA. All participating agencies will enter into and SSA member responsibilities. All participants understand that the written SSA approved before a NOGA can be issued.
dentify/Address Needs	
ist up to three quantifiable needs, as identified in our plan for addressing each need.	your needs assessment, that these program funds will address. Describe
Quantifiable Need	Plan for Addressing Need
ncrease the number of Pharmacy Technician ertifications	- purchase instructional materials - professional development for the instructor - provide certification tests to students at a reduced cost
ncrease the number of Welding certifications	- purchase new welding machines - purchase welding simulators for the introductory welding classes
ncrease the number of Information Technology ertifications	- purchase instructional materials - professional development for the instructor - provide certification tests to students at a reduced cost
MART Goal	
Describe the summative SMART goal you have ide	entified for this program (a goal that is Specific, Measurable, Achievable, atcome or consistent with the purpose of the grant.
Willis ISD will increase certifications in Pharmacy T school year.	Tech, Welding, and Information Technology by 25% for the 2019-2020
Measurable Progress	
	d of the first three grant quarters to measure progress toward meeting the grant.
Identify how many students in each program are	working towards certification rmine students' level of competency for each certification
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CDN 170904

Vendor ID 1746002568

SSAs are **not permitted** for this grant. **Check the box below if applying as a fiscal agent.** 

**Shared Services Arrangements** 

Amendment #

CDN 170904   Vendor ID 1746002568	Amendment #
Measurable Progress (Cont.)	
Second-Quarter Benchmark	
	to determine if students are on pace to master certification dents that are behind in certification requirements
Third-Quarter Benchmark	
tests	dustry-developed pre-tests to determine if they are prepared for the certification supplemental instruction in their respective program
Project Evaluation and Modification	
	n data to determine when and how to modify your program. If your meeting your summative SMART goal, describe how you will use evaluation lity.
If the benchmarks do not show adequate pa "Academy" period along with extended inst assigned "student mentors" that are progre	rogress, then supplemental instruction will be used during the students' truction after regular school hours. In addition students who are behind will be ssing towards certification.

CDN 170904 Vendor ID 1746002568

Amendment #

## **Statutory/Program Assurances**

The following assurances apply to this grant program. In order to meet the requirements of the grant, the grantee must comply with these assurances.

Check each of the following boxes to indicate your compliance.

- 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.
- ☑ 4. The applicant provides assurance that curriculum will be appropriately aligned to regional labor market supported CTE programs of study.
- 5. The applicant provides assurance to adhere to all Statutory Requirements and TEA Program Requirements as noted in the 2019–2020 Perkins Reserve Grant Program Guidelines.
- 6. The applicant provides assurance to adhere to all Performance Measures, as noted in the 2019–2020 Perkins Reserve Grant Program Guidelines, and shall provide the Texas Education Agency, upon request, any performance data necessary to assess the success of the program.
- 7. Focus Area 1 applicants provide assurance that they will submit a Memorandum of Understanding (MOU) detailing the relationship between the institute of higher education, the LEA, and business and industry partner(s) within 90 days of the grant start date. The MOU will establish 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 students.
- 8. <u>Focus Area 1</u> applicants provide assurance that they and at least one representative from each required partner organization will attend all required conferences as described in the 2019–2020 Perkins Reserve Grant Program Guidelines.
- 9. Focus Area 2 applicants provide assurance that any industry-based certifications supported through this grant are listed on the 2018–2019 or 2019–2020 Final List of Industry-Based Certifications of the A-F Accountability System.

CDN 17	70904	Vendor ID	1746002568	Amendment #	
		Requirem			
impler these o	nent the	e proposed ions. Includ	project. Identif le and explain h	ify partner organizations the applicant organization has collaborated with to fy high-wage and in-demand occupations and CTE programs of study that lead to how regional labor market information was used in identifying and determining twith partner organizations.	) :he
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CDN 17	70904	Vendor ID	1746002568	Amendment #	

- 2. **FOCUS AREA 1 APPLICANTS:** Provide a design for at least one CTE program of study that spans secondary and postsecondary education and includes an appropriate sequence of courses that are aligned with high-wage and in-demand occupations identified by the local regional workforce board. The design must:
  - Describe the commitment from all partners to assist with curriculum development to support relevant and frequent industry experiences for students participating in the program.
  - Identify strategic partnerships that are already in place that provide an advantage in implementing the proposed project.

project.		 
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CDN	170904	Vendor ID	1746002568	Amendment #	

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3. FOCUS AREA 1 APPLICANTS: Provide a sample crosswalk that identifies postsecondary coursework that would be required of a student in the program of study in order to complete a certificate or receive an associate degree from the partnering general academic teaching institution(s) within two to three years of graduating from high school. The crosswalk should align to higher education program of study curricula where applicable and also demonstrate how the project can lead to a bachelor's degree.					

CD	N 1	170904	Vendor ID	1746002568	Amendment #	
TE.	A P	rogram	Requirem	ents		
4.	FO	CUS ARI	EA 1 APPLIC	CANTS: Propose	a sustainability plan to ensure that the applicant and partner organizations ver the end of the grant program.	will
CC	ntii	nue to m	eet the goa	grant art	er the end of the grant program.	
da	ata-s	sharing a	greements)	and recent track	and describe the operational capacity (i.e. dedicated personnel, advisory boa crecord of the identified grant intermediary in supporting key functions inclu ships, collective impact initiatives, and multi-stakeholder grants.	iras, iding
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CDN 170904	Vendor ID 1746002568	Amendment #	
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6. **FOCUS AREA 2 APPLICANTS:** Identify industry-based certifications and programs of study for the proposed project. Include information provided by local workforce development boards, economic development organizations, and/or chambers of commerce to determine high-wage and in-demand occupations and programs of study that lead to these occupations. Include and explain how regional labor market information was used in identifying and determining the industry-based certifications selected.

Information from the Texas Workforce Commission was obtained to identify specific needs in our market area in regards to certifications we are pursuing. Willis ISD is located in the Houston-The Woodlands-Sugarland MSA. The data used herein is reflective of this.

Data that was collected showed annual openings for pharmacy technicians of 894 with a median wage of \$34, 444. TWC expects an increase of 21% of the number of pharmacy technicians needed each year through 2026.

Statistics from TWC indicate a need of 2,530 welders each year with a median wage of \$47,973. TWC expects an increase of 22% of the number of welders needed each year through 2026.

Numbers from TWC indicate annual openings of 1,655 employees in Information Technology with a median wage of \$61,204. TWC expects an increase of 17% of the number of workers in IT needed each year through 2026.

CDN 170904	Vendor ID 1746002568	Amendment #	
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7. **FOCUS AREA 2 APPLICANTS:** Identify how many students will benefit from the grant funding and explain how offering of industry-based certifications will benefit students currently enrolled in the aligned CTE programs of study.

- If choosing to <u>certify a teacher in the industry-based certification to test students</u>, identify how many students will benefit from the grant funding and explain how this will benefit students.
- If choosing to <u>become a testing site</u>, the identify how many students will benefit from the grant funding and describe how becoming a testing site will benefit students in the LEA and within the region.

On a yearly basis there are on average 12-15 students in the Pharmacy Technician program. With grant funding, every student in the program will receive the opportunity to take the Certified Pharmacy Technician exam with the knowledge and skills they need to pass the exam. Students that earn the Pharmacy Technician certificate will have the opportunity to enter the workforce immediately after high school earning a livable wage.

Approximately 60-70 students take Welding/Advanced Welding at Willis High School each year. Currently only about 15% of these students are earning certification through NCCER. Funding from this grant to purchase welding equipment and welding simulators will give students more opportunities to practice and gain mastery on their certification tests. These students will be eligible for high-demand, high-paying jobs with that certification.

There are generally 20-25 students in the advanced Information Technology programs at Willis High School. Certifications in IT, including A+ and Network+ are in high demand in our MSA. Students with these certificates will have the opportunity to find gainful employment in the competitive IT industry. The price of the exams has prevented students from taking these exams in the past. Grant funding will help offset these costs for our students.

CDN 170904 Vendor ID 1746002568	Amendment #
TEA Program Requirements	
8. FOCUS AREA 2 APPLICANTS: Explain to	ne process for paying for exams for students.
Once funding is secure, the teacher puts in	a purchase order for the number of exams or exam vouchers needed. Upon ne exams and vouchers will be paid through grant funds.
9. FOCUS AREA 2 APPLICANTS: Explain e	fforts that have already been made to ensure success during the grant period.
Dialogue between the CTE Director and the already begun. The instructors have been a	e instructors most responsible for students earning these certifications has asked to create a list of needs that will most benefit students taking and passing based on these needs developed by the instructors.

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CDN 170904	Vendor ID 1746002568	Amendment #	
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10. **FOCUS AREA 2 APPLICANTS:** Explain how the applicant organization will ensure that students are prepared for the industry-based certification exams.

The instructors for these students are experts in their fields. They will prepare the students for the exams using rigorous curriculum provided by our industry partners. The IT instructor will be attending a unique professional development opportunity through CompTIA and is already connected to their entire network of educators through the CompTIA networking system. The welding instructor spends hours each day working with his students to perfect their welding skills. He has over 15 years experience as a welding instructor and understands the needs of the industry. The pharmacy technician teacher is a Registered Nurse that has completed all required professional development hours needed to prepare students for the pharmacy technician exam. The teacher uses innovative instructional methods to ensure student mastery of the material.

11. **FOCUS AREA 2 APPLICANTS:** Identify strategic partnerships already in place that provide an advantage in implementing the proposed project.

Several industry partners are in place to assist the students in the pharmacy tech program including Walgreens, CVS, HEB Pharmacy, and Conroe Regional Medical Center. The curriculum provider, Kaduceus, is an industry-recognized provider for pharmacy curriculum. The welding instructor has established working professional relationships with companies in our local Business Park that have expressed an interest in hiring students who certify through our program. ICOTEX is an international company from Germany with a local firm in Conroe that is providing future job opportunities for our students. Their ICOTEX HR Manager has made multiple visits to the CTE Center to establish a relationship with our programs. The IT instructor is a member of the CompTIA Instructor Network where he can connect and collaborate with CompTIA and other IT instructors worldwide. The instructor has access to a plethora of free resources and tools through this strategic partnership to help him be a proficient CompTIA certification trainer.

CDN 170904 Vendor I	D 1746002568	Amendment #	
<b>Equitable Access and</b>	Participation		
Check the appropriate box below to indicate whether any barriers exist to equitable access and participation for any groups			
that receive services funded by this grant.  The applicant assures that no barriers exist to equitable access and participation for any groups receiving services			
funded by this grant.  Barriers exist to equitable access and participation for the following groups receiving services funded by this grant, as			
described below.			
Group		Barrier	
PNP Equitable Service	es e		
Are any private nonprofit	schools located wit	hin the applicant's boundaries?	
If you answered "No" to the Are any private nonprofit		, stop here. You have completed the section. Proceed to the next page.	
C Yes © No			
If you answered "No" to the	e preceding question,	, stop here. You have completed the section. Proceed to the next page.	
5A: Assurances			
		onsultation requirements as listed in Section 1117(b)(1) and/or all eligible private nonprofit schools located within the LEA's boundaries.	
The LEA assures the appropriate Affirmations of Consultation will be provided to TEA's PNP Ombudsman in the manner and time requested.			
5B: Equitable Services	Calculation		
1. LEA's student enrollme	ent		
2. Enrollment of all participating private schools			
3. Total enrollment of LEA and all participating PNPs (line 1 plus line 2)			
4. Total current-year grant allocation			
5. LEA reservation for direct administrative costs, not to exceed the grant's defined limit			
6. Total LEA amount for provision of ESSA PNP equitable services (line 4 minus line 5)			
7. Per-pupil LEA amount for provision of ESSA PNP equitable services (line 6 divided by line 3)			
LEA's total required ESSA PNP equitable services reservation (line 7 times line 2)			

CDN 170904 Vendor ID 1746002568	Amendment #
Request for Grant Funds	
List all of the allowable grant-related activities for which you are requesting gra	nt funds. Include the amounts budgeted for each act
Group similar activities and costs together under the appropriate heading. D planned expenditures on a separate attachn	
PAYROLL COSTS (6100)	BUDGET
PROFESSIONAL AND CONTRACTED SERVICES (6200)	
SUPPLIES AND MATERIALS (6300)	
Pharmacy Training Licenses/Certification Exams	\$3,000
Information Technology Curriculum/Certification Exam vouchers	\$8,000
OTHER OPERATING COSTS (6400)	
Professional Development	\$4,000
CAPITAL OUTLAY (6600)	
Welding machines/simulators	\$15,000

Welding machines/simulators		\$15,000
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**Total Direct Costs** \$30,000

**Indirect Costs** 

**TOTAL BUDGET REQUEST (Direct Costs + Indirect Costs)** \$30,000

CDN 170904	Vendor ID 1746002568	Amendment #	
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# Appendix I: Negotiation and Amendments (leave this section blank when completing the initial application for funding)

An amendment must be submitted when the program plan or budget is altered for the reasons described in the "When to Amend the Application" document posted on the Administering a Grant page of the TEA website and may be mailed OR faxed (not both). To fax: one copy of all sections pertinent to the amendment (including budget attachments), along with a completed and signed page 1, to either (512) 463-9811 or (512) 463-9564. To mail: three copies of all sections pertinent to the amendment (including budget attachments), along with a completed and signed page 1, to the address on page 1. More detailed amendment instructions can be found on the last page of the budget template.

You may duplicate this page

Negotiated/Amended Section  For amendments: Choose the section you wish to amend from the drop down menu.	Negotiated Change/Amendment  For amendments: Describe the changes you are making and the reason for them. Always work with the most recent negotiated or amended application. If you are requesting a revised budget, please include the budget attachments with your amendment.
FOR TEA USE ONLY Changes confirmed with on this date Via phone/fax/email by TEA staff person	
FOR TEA USE ONLY Changes confirmed with on this date Via phone/fax/email by TEA staff person	
FOR TEA USE ONLY Changes confirmed with on this date Via phone/fax/email by TEA staff person	
FOR TEA USE ONLY Changes confirmed with on this date Via phone/fax/email by TEA staff person	
FOR TEA USE ONLY  Changes confirmed with on this date  Via phone/fax/email by TEA staff person	