


# Texas Education Agency Standard Application System (SAS)

<b>2018–2019 Services to Students with Dyslexia</b>		
<b>Program authority:</b>	Texas Education Code, 29.027 as added by House Bill 21, Section 3, 85 <sup>th</sup> Texas Legislature, 2017	<b>FOR TEA USE ONLY</b> Write NOGA ID here:
<b>Grant Period:</b>	May 1, 2018, to August 31, 2019	
<b>Application deadline:</b>	5:00 p.m. Central Time, March 8, 2018	Place date stamp here.
<b>Submittal information:</b>	<p>Applicants must submit one original copy of the application with an original signature, and two copies of the application, printed on one side only and signed by a person authorized to bind the applicant to a contractual agreement, must be received no later than the aforementioned date and time at this address:</p> <p style="text-align: center;">Document Control Center, Grants Administration Division Texas Education Agency, 1701 North Congress Ave. Austin, TX 78701-1494</p>	
<b>Contact information:</b>	Karin Miller, <a href="mailto:karin.miller@tea.texas.gov">karin.miller@tea.texas.gov</a> , (512) 463-9581	

### Schedule #1—General Information

#### Part 1: Applicant Information

Organization name	County-District #	Amendment #	
Edgewood ISD	Bexar-015905		
Vendor ID #	ESC Region #		
1746003122	20		
Mailing address	City	State	ZIP Code
5358 W Commerce St	San Antonio	TX	78237-1354
<b>Primary Contact</b>			
First name	M.I.	Last name	Title
Rafael		Garza	Dyslexia Interventionist
Telephone #	Email address		FAX #
210-444-1024	<a href="mailto:rgarza@eisd.net">rgarza@eisd.net</a>		210-444-8143
<b>Secondary Contact</b>			
First name	M.I.	Last name	Title
Cynthia		Trevino	Executive Director of Pupil Services
Telephone #	Email address		FAX #
210-444-8102	<a href="mailto:cynthia.trevino@eisd.net">cynthia.trevino@eisd.net</a>		210-444-8143

#### 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
Phillip		Chavez	Chief Academic Officer
Telephone #	Email address		FAX #
210-444-8101	<a href="mailto:phillip.chavez@eisd.net">phillip.chavez@eisd.net</a>		210-444-4602
Signature (blue ink preferred)			Date signed


 for Dr. Emesto Castro

3/6/18

Only the legally responsible party may sign this application.

<b>Schedule #1—General Information</b>	
County-district number or vendor ID: 015905	Amendment # (for amendments only):
<b>Part 3: Schedules Required for New or Amended Applications</b>	

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	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
3	Certification of Shared Services	<input checked="" type="checkbox"/>	N/A
4	Request for Amendment	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5	Program Executive Summary	N/A	<input checked="" type="checkbox"/>
6	Program Budget Summary	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7	Payroll Costs (6100)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8	Professional and Contracted Services (6200)	*See important note for competitive grants	<input type="checkbox"/>
9	Supplies and Materials (6300)		<input type="checkbox"/>
10	Other Operating Costs (6400)		<input type="checkbox"/>
11	Capital Outlay (6600)		<input type="checkbox"/>
12	Demographics and Participants to Be Served with Grant Funds		<input type="checkbox"/>
13	Needs Assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14	Management Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15	Project Evaluation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16	Responses to Statutory Requirements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17	Responses to TEA Requirements	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**\*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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Changes on this page have been confirmed with:  Via telephone/fax/email (circle as appropriate)	On this date:  By TEA staff person:

**Schedule #2—Required Attachments and Provisions and Assurances**

County-district number or vendor ID: 015905

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
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No fiscal-related attachments are required for this grant.

#	Name of Required Program-Related Attachment	Description of Required Program-Related Attachment
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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
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with the <u>General and Fiscal Guidelines</u> .
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with the <u>program guidelines for this grant</u> .
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with all <u>General Provisions and Assurances requirements</u> .
<input checked="" type="checkbox"/>	I certify that I am not debarred or suspended. I also certify my acceptance of and compliance with all <u>Debarment and Suspension Certification requirements</u> .

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**Schedule #2—Required Attachments and Provisions and Assurances**

County-district number or vendor ID: 015905

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 will operate as an independent campus or a separate program from the campus in which the program is located, with a separate budget.
4.	The applicant provides assurance that the program will give priority for enrollment to students with dyslexia.
5.	The applicant provides assurance that the program will limit enrollment and services to students who are at least three years of age and younger than nine years of age or are enrolled in the third grade or a lower grade level.
6.	The applicant provides assurance that the program will allow a student who turns nine years of age or older during a school year to remain in the program until the end of that school year.
7.	The applicant provides assurance that the local educational program (LEA) will not charge a fee for the program, other than those authorized by law for students in public schools.
8.	The applicant provides assurance that the LEA will not require a parent to enroll a child in the program.
9.	The applicant provides assurance that the LEA will not allow an admission, review, and dismissal committee to place a student in the program without the written consent of the student's parent or guardian.
10.	The applicant provides assurance that the LEA will not continue the placement of a student in the program after the student's parent or guardian revokes consent, in writing, to the student's placement in the program.
11.	The applicant provides assurance that the program will incorporate meaningful inclusion.
12.	The applicant provides assurance that it will develop appropriate systems and processes to collect and report baseline academic and functional data and achievements for students enrolled in the program as required by TEA.
13.	The applicant provides assurance that it will submit data on the academic and functional achievements to TEA, in a TEA approved format, by the requested date. This data may be the basis for awarding continuation grants.

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**Schedule #3—Certification of Shared Services**

County-district number or vendor ID: 015905

Amendment # (for amendments only):

I, as one of the below member entity authorized officials, certify that to the best of my knowledge, the information contained in this application is correct and complete, that the entity that I represent has authorized me to file this application, and that such authorization action is recorded in the minutes of the local agency's board meeting.

The participating or intermediate education agency named has been designated as the administrative and fiscal agent for this project and is authorized to receive and expend funds for the conduct of this project. The fiscal agent is accountable for all shared services arrangement (SSA) activities and is therefore responsible for ensuring that all funds including payments to members of SSAs are expended in accordance with applicable laws and regulations.

All participating agencies have entered into a written SSA agreement that describes the responsibilities of the fiscal agent and SSA members, including the refund liability that may result from on-site monitoring or audits and the final disposition of equipment, facilities, and materials purchased for this project from funds specified below.

It is understood that the fiscal agent is responsible for the refund for any exceptions taken as a result of on-site monitoring or audits; however, based upon the SSA agreement, which must be on file with the fiscal agent for review, the fiscal agent may have recourse to the member agencies where the discrepancy(ies) occurred.

Any additional funds that result from an increase will not require additional signatures. Each member identified below acknowledges accountability for the requirements contained in the provisions and assurances listed in Schedule #2, Parts 2 and 3, as applicable. Each member entity certifies its agreement to participate in this SSA, as stated throughout this grant application.

#	County-District # and Name	Authorized Official Name and Signature	Telephone Number and Email Address	Funding Amount
<b>Fiscal Agent</b>				
1.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
<b>Member Districts</b>				
2.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
3.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
4.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
5.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
6.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
7.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
8.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	

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<b>Schedule #3—Certification of Shared Services (cont.)</b>				
County-district number or vendor ID: 015905			Amendment # (for amendments only):	
#	County-District # and Name	Authorized Official Name and Signature	Telephone Number and Email Address	Funding Amount
<b>Member Districts</b>				
9.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
10.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
11.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
12.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
13.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
14.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
15.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
16.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
17.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
18.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
19.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
20.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
<b>Grand total:</b>				

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**Schedule #4—Request for Amendment**

County-district number or vendor ID: 015905

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, Grants Administration Division, 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) 463-9564.

The last day to submit an amendment to TEA is listed on the TEA Grant Opportunities 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 Grants Administration Division Administering a Grant 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 ( %):		\$	\$	\$	\$
8.	Total costs:		\$	\$	\$	\$

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On this date:

\_\_\_\_\_  
Via telephone/fax/email (circle as appropriate)

\_\_\_\_\_  
By TEA staff person:

**Schedule #4—Request for Amendment (cont.)**

County-district number or vendor ID: 015905

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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By TEA staff person:



**Schedule #5—Program Executive Summary**

County-district number or vendor ID: 015905 015905

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.

The purpose of this grant is to provide all Pre-K through 3<sup>rd</sup> graders an opportunity to be offered an innovative approach to a holistic system of Dyslexic identification and instructional supports. The program will begin with the administration of a universal screener through both an electronic mechanism, ISTATON, and paper mechanism format utilizing TPRI and CIRCLE. The purpose of the two-screener mechanism is to allow for a more balanced approach to identifying potential Dyslexic students.

The district has traditionally under-identified and underserved students in the area of dyslexia. The program will begin with an identification process which assesses all students exhibiting characteristics of Dyslexia. Instruction will be created through the introduction and implementation of a leveled Dyslexia intervention program based on skills versus a grade level approach.

Through the foundational piece of a Dyslexia Intervention Program (DIP), the assigned implementation based on individual students' needs will allow the intervention teachers to go through a series of identified lessons with each student. The program will also be utilizing supplemental resources that also promote the continued development of comprehension skills.

The program will be developed in multiple forms. The 1<sup>st</sup> phase will be conducted during school in which an identified pull-out-program will occur in which students will be serviced with a maximum of 10 students in a given session(s). Students will go through a series of lessons with their assigned dyslexia interventionist. The purpose of the small maximum number of 10 students would be to provide the best intensive intervention that will ultimately benefit the student.

The 2<sup>nd</sup> component will include a tutoring program that will provide both after school and extended day learning in which food will be provided to students attending the program. The tutoring program will provide an extension of and continued support for a robust data-driven approach to reinforcing skills that will advance the student's learning and behavior.

The 3<sup>rd</sup> component will include the engagement and training of parents and guardians in high quality instruction and the usage of technology targeted towards best practice for project-based learning and more comprehensive summative preparation for local and state assessments. This component is especially critical to the successful identification, evaluation and, if needed, accommodation for the students exhibiting characteristics of dyslexia as it is a hereditary condition that has no cure. With the proper inclusion of parents and guardians, the Dyslexia program at Edgewood ISD will be better able to identify and be informed by best practices in a cultural as well as socioeconomic context for the welfare of the whole student scholar and their family.

The 4<sup>th</sup> component will include a professional development system. The Dyslexia intervention staff will offer professional development to general education teachers who will be providing instruction to students served by this grant program. This is to include but not limited to the following topics:

- Characteristics of a dyslexic child,

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On this date:

Via telephone/fax/email (circle as appropriate)

By TEA staff person:

- Targeting their academic, social, emotional, and behavioral needs,
- Best practices to support a dyslexic student,
- Strategies and interventions for the general education classroom, and
- Accommodations for the whole school environment, to include testing centers.

The 5<sup>th</sup> component will include a resource library to be kept at both a district and campus level for usage by both preidentified general education and dyslexia intervention teachers. This hub will be accessible both digitally and physically. Resources will include access to leveled readers, modified materials, and online resources to support scaffolded learning when a dyslexic student is working individually. This component is also critical to the award of this grant as present resources are not widely available to the campuses for access or distribution.

The 6<sup>th</sup> component will address the students during the summer school session. To address the needs of the identified 5<sup>th</sup> grade dyslexic students who did not meet Student Success Initiative (SSI) requirements and who have to take the 3<sup>rd</sup> administration of the Reading and/or Math STAAR exams, students will attend summer school. These students will attend during the same time and period as their peers. Upon the district receiving the student scores, determination will be made as to progress made and whether students will be promoted or retained as prescribed by state SSI guidelines and criteria.

**Schedule #5—Program Executive Summary (cont.)**

County-district number or vendor ID: 015905

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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By TEA staff person:

**Schedule #6—Program Budget Summary**

County-district number or vendor ID: 015905			Amendment # (for amendments only):		
Program authority: Texas Education Code, 29.027, House Bill 21, Section 3, 85 <sup>th</sup> Texas Legislature, 2017					
Grant period: May 1, 2018, to August 31, 2019			Fund code/shared services arrangement code: 429/459		
<b>Budget Summary</b>					
Schedule #	Title	Class/ Object Code	Program Cost	Admin Cost	Total Budgeted Cost
Schedule #7	Payroll Costs (6100)	6100	\$797,000	\$	\$797,000
Schedule #8	Professional and Contracted Services (6200)	6200	\$110,000	\$	\$110,000
Schedule #9	Supplies and Materials (6300)	6300	\$75,000	\$	\$75,000
Schedule #10	Other Operating Costs (6400)	6400	\$18,000	\$	\$18,000
Schedule #11	Capital Outlay (6600)	6600	\$	\$	\$
Total direct costs:			\$	\$	\$
Percentage% indirect costs (see note):			N/A	\$	\$
Grand total of budgeted costs (add all entries in each column):			\$1,000,000	\$	\$1,000,000
<b>Shared Services Arrangement</b>					
6493	Payments to member districts of shared services arrangements		\$	\$	\$
<b>Administrative Cost Calculation</b>					
Enter the total grant amount requested:					\$1,000,000
Percentage limit on administrative costs established for the program (15%):					x .15
Multiply and round down to the nearest whole dollar. Enter the result. This is the maximum amount allowable for administrative costs, including indirect costs:					\$150,000

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.

If selected for a competitive grant, your award amount will be the lesser of the grand total of budgeted costs as stated on this schedule (the box with the bold outline), or the sum of all line items listed on this schedule, or the maximum allowable award amount. TEA is not responsible for math errors.

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**nSchedule #7—Payroll Costs (6100)**

County-district number or vendor ID: 015905

Amendment # (for amendments only):

Employee Position Title		Estimated # of Positions 100% Grant Funded	Estimated # of Positions <100% Grant Funded	Grant Amount Budgeted
<b>Academic/Instructional</b>				
1	Teacher	12		\$660,000
2	Educational aide			\$
3	Tutor			\$
<b>Program Management and Administration</b>				
4	Project director/administrator			\$
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			\$
<b>Auxiliary</b>				
12	Counselor			\$
13	Social worker			\$
14	Community liaison/parent coordinator			\$
<b>Other Employee Positions</b>				
15	Title			\$
16	Title			\$
17	Title			\$
18	Subtotal employee costs:			\$
<b>Substitute, Extra-Duty Pay, Benefits Costs</b>				
19	6112	Substitute pay		\$
20	6119	Professional staff extra-duty pay		\$20,000
21	6121	Support staff extra-duty pay		\$10,000
22	6140	Employee benefits		\$107,000
23	61XX	Tuition remission (IHEs only)		\$
24	Subtotal substitute, extra-duty, benefits costs			\$137,000
25	<b>Grand total (Subtotal employee costs plus subtotal substitute, extra-duty, benefits costs):</b>			<b>\$797,000</b>

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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<b>Schedule #8—Professional and Contracted Services (6200)</b>		
County-district number or vendor ID: 015905		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
6269	Rental or lease of buildings, space in buildings, or land	\$
	Specify purpose:	
<b>a. Subtotal of professional and contracted services (6200) costs requiring specific approval:</b>		<b>\$</b>
Professional and Contracted Services		
#	Description of Service and Purpose	Grant Amount Budgeted
1	Student assessors	\$100,000
2	Bilingual research-based Dyslexia program training	\$5,000
3		\$
4		\$
5		\$
6		\$
7		\$
8		\$
9		\$
10		\$
11		\$
12		\$
13		\$
14		\$
<b>b. Subtotal of professional and contracted services:</b>		<b>\$</b>
<b>c. Remaining 6200—Professional and contracted services that do not require specific approval:</b>		<b>\$5,000</b>
<b>(Sum of lines a, b, and c) Grand total</b>		<b>\$110,000</b>

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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Changes on this page have been confirmed with:	On this date:
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<b>Schedule #9—Supplies and Materials (6300)</b>		
County-District Number or Vendor ID: 015905		Amendment number (for amendments only):
<b>Supplies and Materials Requiring Specific Approval</b>		
<b>Expense Item Description</b>		<b>Grant Amount Budgeted</b>
6300	Total supplies and materials that do not require specific approval:	\$75,000
<b>Grand total:</b>		<b>\$75,000</b>

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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Changes on this page have been confirmed with:	On this date:
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<b>Schedule #10—Other Operating Costs (6400)</b>		
County-District Number or Vendor ID: 015905		Amendment number (for amendments only):
<b>Expense Item Description</b>		<b>Grant Amount Budgeted</b>
6411	Out-of-state travel for employees. Must be allowable per Program Guidelines and grantee must keep documentation locally.	\$
Subtotal other operating costs requiring specific approval:		\$
Remaining 6400—Other operating costs that do not require specific approval:		\$18,000
<b>Grand total:</b>		<b>\$18,000</b>

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

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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<b>Schedule #11—Capital Outlay (6600)</b>				
County-District Number or Vendor ID: 015905			Amendment number (for amendments only):	
#	Description and Purpose	Quantity	Unit Cost	Grant Amount Budgeted
<b>6669—Library Books and Media (capitalized and controlled by library)</b>				
1		N/A	N/A	\$
<b>66XX—Computing Devices, capitalized</b>				
2			\$	\$
3			\$	\$
4			\$	\$
5			\$	\$
6			\$	\$
7			\$	\$
8			\$	\$
9			\$	\$
10			\$	\$
11			\$	\$
<b>66XX—Software, capitalized</b>				
12			\$	\$
13			\$	\$
14			\$	\$
15			\$	\$
16			\$	\$
17			\$	\$
18			\$	\$
<b>66XX—Equipment or furniture</b>				
19			\$	\$
20			\$	\$
21			\$	\$
22			\$	\$
23			\$	\$
24			\$	\$
25			\$	\$
26			\$	\$
27			\$	\$
28			\$	\$
<b>66XX—Capital expenditures for additions, improvements, or modifications to capital assets that materially increase their value or useful life (not ordinary repairs and maintenance)</b>				
29				\$
<b>Grand total:</b>				\$

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### Schedule #12—Demographics of Participants to Be Served with Grant Funds

County-district number or vendor ID: 015905

Amendment # (for amendments only):

**Part 1: Students/Teachers To Be Served With Grant Funds.** Enter the total number of students and teachers in each grade projected to be served under the grant program. Use the comment 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. Response is limited to space provided. Use Arial font, no smaller than 10 point.

**School Type:**  Public  Open-Enrollment Charter  Private Nonprofit  Private For Profit  Public Institution

Grade	Number of Students	Number of Teachers	Student/Teacher Ratio
PK	80	2	1:40
K	100	10	1:10
1 <sup>st</sup>	100	10	1:10
2 <sup>nd</sup>	100	10	1:10
3 <sup>rd</sup>	100	10	1:10

**COMMENTS**

**Part 2: Amount of Instruction.** Enter amount of instruction to be provided with grant funds. Use the comment section to add a description of any data not specifically requested that is important to understanding the amount of instruction to be provided by this grant program. Response is limited to space provided. Use Arial font, no smaller than 10 point.

Amount of Instruction		COMMENTS
School day hours (ex) 8:30am – 4:30pm	7:45AM- 3:15PM (7.5 hours)	Start and stop times as per district calendar.
Number of days in school year	176	According to the school calendar.
Minutes of instruction per school year	19,200	To include professional development, excluding programming during summer school hours.

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Need

**Schedule #13—Needs Assessment**

County-district number or vendor ID: 015905

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 outcome or required accomplishment. Describe your needs assessment process, including a description of how needs are prioritized. If this application is for a district level grant that will only serve specific campuses, list the name of the campus(es) to be served and why they were selected. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

The Dyslexia program at Edgewood ISD is fairly nascent in its institution and operation. The head of the Dyslexia program at Edgewood recently established a committee with himself and the 10, for all of the elementary school, campus dyslexia instructors. Altogether, the Dyslexia Program Committee convenes to discuss and prioritize needs as identified through a process review of state and local summative assessment data and behavioral performance trackers in evaluation of whole student success. Utilizing the district's Dyslexia Intervention Program (DIP) and other research-based intervention strategies, the committee is working to refine an ongoing monitoring and evaluation metric supported by a data-driven, results oriented framework that will be strategic and available for quick and efficient implementation at the campus-level.

The district has a total enrollment of 2,385 students in grades 1-3; of them, 76 have been identified as dyslexic. Utilizing the CIPP methodology, the committee conducted a review of component data that is limited at consequence to a lack of infrastructure for data collection and monitoring with regard to the district's dyslexic student population. Together with both internal and external stakeholders, the committee facilitated a discovery dialogue to determine that the foundational needs of the Dyslexia program at Edgewood include but are not limited to:

1. Identification of potential dyslexia students in a timely manner.
2. Increased access to fundamental and cutting-edge Professional Development.
3. Instating student-centered, individualized curriculum to address the academic and behavioral performance of students identified as dyslexic.
4. Build the capacity of teachers and parents/guardians to ensure better preparedness for students identifies as dyslexic on state and local assessments.
5. Aggrandize the availability and access to resources that meet the needs of identified students.
6. Increased availability and access to frequent Professional Development for parents/guardians to be able to gain awareness of how to support a dyslexic learner.

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**Schedule #13—Needs Assessment (cont.)**

County-district number or vendor ID: 015905

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.	Identify potential dyslexia students in a timely manner.	Hire professional staff to both screen and test students. Students need to be quickly assessed in order to properly allow students to be placed in the actual intervention program.
2.	Professional development is inadequate.	PD will be provided by the Dyslexia Interventionists in a model that will best reflect a Trainer of Trainer system. The system modeled include a various amount of topics aligned to both campus and district needs.
3.	Underperformance in state assessments.	Dyslexia classroom strategies will be distributed in alignment with highly impactful objectives to general education staff.
4.	Lack of resources to meet the needs of identified students.	Updated classroom resources would be purchased for use in classrooms and extended day services.
5.	Parental Awareness of how to support a dyslexia learner.	Beyond after school instructional based community sessions, there will also be workshops training in the use of technology as a resource tool.

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**Schedule #14—Management Plan**

County-district number or vendor ID: 015905

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.	Dyslexia Interventionists	Highly qualified as per TEA guidelines, valid Texas Teaching Certificate, master reading teacher experience, extensive experience as a elementary and/or dyslexia case manager.
2.	Testing Assessors	Experience as a dyslexia assessor, master reading teacher experience, bilingual.
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.	Assess all students in a timely manner.	1. Each campus will assess identified students within a 3-weeks window.	09/20/2018	08/31/2019
		2. Identified students will begin the program and parents will be notified within 2-weeks from completion.	09/20/2018	08/31/2019
		3. General Education Teachers will notify intervention teachers of students who exhibit characteristics of dyslexia.	08/20/2018	08/31/2019
		4. Dyslexia Intervention Teachers will schedule meetings and notify teachers, staff and parents.	09/20/2018	08/31/2019
2.	Increase the number of PD opportunities.	1. Dyslexia Intervention teachers will attend PD sessions on topics based on data needs.	08/20/2018	08/31/2019
		2. General Education teachers on the campus will attend a monthly PD session with interventionist on campus.	09/20/2018	05/24/2019
		3. General Education teachers will implement best practices and strategies as they work with their students in the classroom and in small group settings.	09/20/20018	3/24/2019
		4. Campus staff will provide topics or areas of concern to be addressed and discussed at PD sessions.	09/20/2018	05/24/2019

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**Schedule #14—Management Plan (cont.)**

County-district number or vendor ID: 015905

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.

Through frequent assessment, evaluation and surveying at the campus level, students served by the Dyslexia program at Edgewood ISD will have both their academic and behavioral performances observed for reinforcement and/or intervention utilizing the results of ongoing assessment and data retrieval from CIRCLE, Pinnacle, benchmark data and STAAR testing results to ensure the effectiveness of the program throughout its implementation cycle. Given that the Dyslexia program is in development at Edgewood ISD, this grant will be pivotal in determining the scale of the Kanban system that, in place at all ten (10) elementary schools and early childhood centers (2), will reliably inform the program's goals and objectives as stated for any reinforcement or corrective action that may be determined as needed to maintain compliance with the grant through its lifecycle and monitoring periods.

**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.

The project will be incorporated into the current PD Dyslexia plan for the district to ensure additional trainings are aligned with additional professional development to be offered via grant funds to allow for maximum participation for district staff.

The district does have current campus pieces of instructional resources but lacks full alignment, which is needed.

If awarded, the grant will enable the facilitation of monthly meetings to address compliance from each campus representative – the 12 Dyslexia Interventionists. Compliance update worksheets will be collected to check for growth in these monthly checkpoints.

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**Schedule #15—Project Evaluation**

County-district number or vendor ID: 015905

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.	STAAR Assessments	1.	Improved STAAR scores.
		2.	Comparison of individual 2017-18 and 2018-19 scores.
		3.	Benchmarking STAAR scores for continued improvement.
2.	Attendance Rate	1.	Positive Percent change on a monthly, quarterly and yearly basis.
		2.	Evaluation of individual student attendance reports.
		3.	Attendance at tutoring and extended day learning sessions.
3.	PD Sessions Completed	1.	Voluntary registration for professional development opportunities.
		2.	Number of teachers enrolled and in attendance at PD sessions.
		3.	Monitored lesson plans reflecting strategies learned/reinforced at PD sessions.
4.	Number of Students Identified and Assessed	1.	Completion of testing and associated dyslexia folders.
		2.	Comparison of the dyslexia student population year-by-year for trends and information.
		3.	Number of students that are academically successful as determined by scores and promotion.
5.	Parental Engagement	1.	Registration to participate in an awareness event facilitated at the campus-level.
		2.	Attendance to participate in an awareness event facilitated at the campus-level.
		3.	Survey results from the Dyslexia Program and Services Survey.

**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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Basic data was collected to show the underrepresented number of students participating in the program based on state recommendations.

The Dyslexia committee was able to take historical data on STAAR performance and ISTATON data to identify lack of growth in key academic awareness including the major issues involving comprehension.

These students also have a high tendency to own other behavioral components which are to be addressed in this grant system.

The major problems are identified as needs in the initial opening. Checkpoints will be created monthly to address the key areas along with adjustments to ensure proper realignment if needed.

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**Schedule #16—Responses to Statutory Requirements (cont.)**

County-district number or vendor ID: 015905

Amendment # (for amendments only):

**Statutory Requirement 1:** Describe how the program will incorporate evidence-based and research-based design and how the program will include effective use of technology. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

The Dyslexia program at Edgewood ISD will incorporate instruction that provides substantial coverage in the key components of reading as identified by the National Reading Panel (NICHD, 2000) for phonemic awareness, phonics, fluency, vocabulary and text comprehension utilizing iPads and other equipment to improve and innovatively approach student engagement and access to systematically structured and tiered progression from simple to complex components of literacy and comprehension.

**Statutory Requirement 2:** Describe how the program will collect empirical data on student achievement and improvement and use that data to support effective program implementation. The applicant should describe the process by which baselines for these metrics will be established. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

The Dyslexia program at Edgewood ISD will collect empirical data on student achievement and improvement utilizing the results of ongoing assessment and data retrieval from CIRCLE, Pinnacle, IStation, benchmark data and STAAR testing results to ensure the effectiveness of the program throughout its implementation cycle. Given that the Dyslexia program is in development at Edgewood ISD, this grant will be pivotal in refining the process by which baselines for these metrics will be determined.

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**Schedule #16—Responses to Statutory Requirements (cont.)**

County-district number or vendor ID: 015905

Amendment # (for amendments only):

**Statutory Requirement 3:** Describe how the program will incorporate parental support and collaboration. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

The Dyslexia program at Edgewood ISD will incorporate parental support and collaboration by providing access to a resource library accessible at the campus and district levels for information and intervention materials for both students and their families. Since dyslexia is hereditary, parental support and collaboration is paramount to alleviating the crippling effects of this increasingly common learning disability that staggers a student's achievement and capacity to read, write and speak with mastery and fluency. With the deployment of such strategies like Kanban at the hub and dispatched throughout the twelve (12) campuses that which this grant will function, data-driven and customer-focused strategic planning for the Dyslexia program will ensure grant compliance, inform effectiveness of programming in place and suggest further improvements.

**Statutory Requirement 4:** Describe how the proposed program will reflect the diversity of the state and how the program can be replicated for students statewide. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

The Dyslexia program at Edgewood ISD will reflect the diversity of the state by providing new and robust literacy, comprehension instruction and professional development to non/disabled students ages 3-9 years old and grant-funded instructors at each of the ten (10) elementary schools and both of the early childhood centers (2) within the district. Employing a holistic approach to this grant opportunity, the Dyslexia program at Edgewood ISD will work to seamlessly include efficacious tenets of engagement with community and family members to build the capacity of the whole student and the whole school to be served by this particular grant opportunity.

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**Schedule #17—Responses to TEA Program Requirements**

County-district number or vendor ID: 015905

Amendment # (for amendments only):

**TEA Program Requirement 1:** Describe how the program will use innovative approaches to effectively address the unique academic and functional needs of students with dyslexia. Applicants may focus on new and innovative practices, new and innovative ways to remove barriers to effective implementation of accepted practices, or both. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

The Dyslexia program at Edgewood ISD will be a new and robust program that will function to better serve student scholars throughout the district that may be dealing with the effects of dyslexia though have not been identified as well as those who have been identified as dyslexic between the ages of 3-9 years old. In order to best serve the student scholars in this program, Edgewood ISD will deploy instructional leaders at each of the twelve (12) campuses serving students between the ages of 3-9 years old to ensure that they are individually identified, screened and assessed for necessary accommodation(s) and/or other intervention(s) to ensure their academic and behavioral success. Utilizing best practices as provided by Vaughn and Linan-Thompson (2003, pp. 299-320) and Shaywitz (2003, pp. 257-262), implementing tools for effective early intervention programming beginning in pre-kindergarten and designing the program to accentuate systematic, explicit and intensive reading instruction based on critical elements associated with improved reading such as phonemic awareness, phonics, fluency in word recognition and text reading and comprehension will produce measureable results for optimal reproduction and duplication.

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**Schedule #17—Responses to TEA Program Requirements (cont.)**

County-district number or vendor ID: 015905

Amendment # (for amendments only):

**TEA Program Requirement 2:** Describe coordination of services with private or community-based providers. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

NA – Program will not coordinate with private or community based providers.

The Dyslexia program at Edgewood ISD is in development and will require a descriptive project design, plan and budget prior to recruiting the support and/or collaboration of private or community based providers. Collaboration opportunities will be revisited at a later date in order to help sustain and scale the Dyslexia program at Edgewood ISD.

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