



Special Education Applicant Designation and Certification Form Training

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Purpose

- **The purpose of the Applicant Designation and Certification Form (ADC) is to manage your shared services arrangements in the application and to indicate how you will apply for funds for each fund source in the application.**
- **The fund sources in the Special Education Federal Grant are:**
 - **IDEA-B Formula**
 - **IDEA-B Preschool**
 - **IDEA-B Discretionary Deaf**



How to Locate the ADC

- Log in to TEAL and select eGrants as the application
- Enter CDN or vendor ID
- From the Grants Tab, select Apply for Eligible Grants
- Select 2020-2021 Special Education Application and Applicant Designation and Certification

tasha.clifton Role: TEAGrantsDirector TEA Central Time Help Exit

Organization Name: 13 Region XIII ESC Region: 13 CDN: Vendor ID: GO



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Apply for Eligible Grants

Grants Description	Status	Due Date	ID
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There are no Grants applications available.



Completing the ADC

Form Status: <Selection_Process> Form ID: XXXXXXXXXXXXXXXXXXXX

eGrants
TEXAS EDUCATION AGENCY
SAS#: XXXXXXXX

Organization: _____ County District: _____
 Campus/Site: _____ ESC Region: _____
 Vendor ID: _____ School Year: _____

<Name of Grant Program> Instructions

<General Information>
GS2200 - Applicant Designation and Certification

Amendment #: XX
Version #: XX

Part 1: Designation

Designation Copy Prior Year Data						
Funding Source	Apply on Own	Apply as Fiscal Agent of SSA	Not Apply at All	Apply as Member of SSA	Select a Fiscal Agent <i>only</i> if you selected "Apply as Member of SSA".	
					Designated Fiscal Agent Name (Entity Name)	Fiscal Agent CDN
1. <grant description from TEA Calendar>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Select One	▼
2. <grant description from TEA Calendar>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Select One	▼
3. <grant description from TEA Calendar>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Select One	▼
4. <grant description from TEA Calendar>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Select One	▼
5. <grant description from TEA Calendar>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Select One	▼
6. <grant description from TEA Calendar>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Select One	▼
7. <grant description from TEA Calendar>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Select One	▼
8. <grant description from TEA Calendar>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Select One	▼

*Allocation amount(s) are posted at https://tea.texas.gov/Finance_and_Grants/Grants/Applying_for_a_Grant/Entitlements

- Fund Source Information will pre-fill
- Select designation
 - Apply on Own
 - Apply a Fiscal Agent of SSA
 - Not Apply At All
 - Apply as Member of SSA
- If in SSA, Select Fiscal Agent from drop-down, Fiscal Agent CDN will auto-populate



Completing the ADC - Examples

Scenario 1 - Best ISD

Eligible Fund Sources	Selected Designation
IDEA-B Formula	Apply as Member of an SSA
IDEA-B Discretionary Deaf	Not Apply At All

Result: Best ISD will not see an application in eGrants. The IDEA-B Formula grant for BEST ISD will appear in the application for their fiscal agent (FA) and the FA will apply on their behalf.

Scenario 2 - Joy ISD

Eligible Fund Sources	Selected Designation
IDEA-B Formula	Apply on Own
IDEA-B Preschool	Apply as Member of an SSA
IDEA-B Discretionary Deaf	Not Apply At All

Result: Joy ISD will see an application in eGrants, but only for the IDEA-B Formula fund source. The FA will be applying for IDEA-B Preschool on their behalf and they will not receive IDEA-B Discretionary funds.



Completing the ADC

- Each organization's authorized official must certify agreement with the statements written in this section.
- The selected designation must remain in effect for the duration of the project period.
- If in an SSA, all participating organizations have entered into a written shared services agreement.

Form Status: <Selection Process> Form ID:XXXXXXXXXXXXXXXXXX

eGrants
TEXAS EDUCATION AGENCY
SAS#: XXXXXXXX

Organization:
Campus/Site:
Vendor ID:

County District:
ESC Region:
School Year:

<Name of Grant Program> Instructions

<General Information>
GS2200 - Applicant Designation and Certification

Part 2: Certification and Incorporation

Certification and Incorporation Statement

I understand that the designation selected above will remain in effect for the duration of the project period for the program(s) as specified.

I certify that to the best of my knowledge, the information contained in this form is correct and complete and that I am authorized to file this certification on behalf of the applicant organization.

A single organization applying for any grant program on its own certifies the designation as an individual applicant for the program(s) specified in this designation form. For each member of a Shared Services Arrangement (SSA), the member certifies its agreement to participate in an SSA, as stated for the program(s) specified in this designation form. For each organization registering as a fiscal agent, the organization certifies its agreement to act as fiscal agent for the SSA as stated for the program(s) specified in this designation form.

If **Apply as Member of SSA** has been selected for any funding source, the designated fiscal agent is the administrative and fiscal agent for this project and is authorized to receive and expend funds for the conduct of this project on behalf of the members. The fiscal agent is accountable for all shared services arrangement activities and is therefore responsible for ensuring that all funds, including payments to members of shared services arrangements, are expended in accordance with applicable laws and regulations.

All participating organizations have entered into a written shared services agreement which 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.

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

The authorized official has read and certifies agreement as stated above.

Authorized Official Select Contact: or

First Name:	Middle Initial:	Last Name:	Title:
Phone:	Ext:	E-Mail:	

Submitter Information

First Name:	Last Name:
Approval ID:	Submit Date and Time:

Only the legally responsible party may submit this form.

Submission TIPS

- **SC5003 must be submitted first to access the ADC**
- **ADC must be submitted per individual LEA**
- **Only grantee officials can certify and submit the ADC**
- **If joining SSA, contact fiscal agent first**
- **FA must submit their ADC first**
- **If FA is not in drop down, contact FA**

Submission TIPS

- **Choose the correct designation**
 - **Apply on Own – own application**
 - **Apply as Fiscal Agent – member information appears in Fiscal Agent application**
 - **Not Apply at All – not in application**
 - **Apply as Member – appears in FA application**
- **Any questions, contact negotiator**



Contact Information

Regions 1 - 10

Regions 1 - 10		
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