	Letter of Interest (LC		•	•		15, 2021	
Texas Education Agency	® NOGA ID						
Authorizing legislation							
This LOI application must b	pe submitted via email to loi a	application	s@tea.tex	as.gov.		Application stamp-ir	n date and time
The LOI application may be are acceptable.	e signed with a digital ID or it	t may be sig	ned by han	d. Both forms	of signature		
TEA must receive the appli	cation by 11:59 p.m. CT, Jur	ne 15, 2021					
Grant period from	July 15,	2021 - Au	gust 31, 2	2022			
Pre-award costs permit	ted from Pre-	Award Co	sts Are N	ot Permitte	d		
Required Attachmer	nts (linked along with this for	rm on the TE	A Grants Op	portunities pa	ge)		
	the grant's budget sched	lules					
2. Attachment A: Progra	am Agreement						
Amendment Number	er						
Amendment number (For amendments only; er	nter N/A w	hen com	oleting this f	orm to apply	for grant funds):	
Applicant Informati	on						
Organization		CD	N	Campus		ESC DUI	NS
Address			City		ZIP	Vendor ID	
Primary Contact		Email				Phone	
Secondary Contact		Email				Phone	
Certification and Inc							
	pplication constitutes an						
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							
	reement. I certify that any				_	_	
	olicable federal and state		-				
	eptance of the requireme ents are incorporated by r						
☐ LOI application, gui	delines, and instructions			□ Deliberation	ebarment and	Suspension Certi	fication
☐ General and applica	ation-specific Provisions a	and Assura	nces		bbying Certifi	ication	
					,	ica ti o i i	

Phone

Date

Email

Signature

RFA # 701-21-120 SAS # 701A-22

CDN	Vendor ID	Amendment #
Sha	red Services Arrangements	
	Shared services arrangements (SSAs) a	are permitted for this grant. Check the box below if applying as fiscal agent.
	into a written SSA agreement des	oplication is the fiscal agent of a planned SSA. All participating agencies will enter scribing the fiscal agent and SSA member responsibilities. All participants vices Arrangement Attachment" must be completed and signed by all SSA before the NOGA is issued.
Stat	utory/Program Assurances	
	ollowing assurances apply to this proof	gram. In order to meet the requirements of the program, the applicant must
1. (r ap b	eplace) state mandates, State Board or oplicant provides assurance that state ecause of the availability of these functioned from this LOI will be supplement	cate your compliance. at program funds will supplement (increase the level of service), and not supplant of Education rules, and activities previously conducted with state or local funds. The e or local funds may not be decreased or diverted for other purposes merely ds. The applicant provides assurance that program services and activities to be nearly to existing services and activities and will not be used for any services or pard of Education rules, or local policy.
		at the application does not contain any information that would be protected by the Act (FERPA) from general release to the public.
	The applicant provides assurance to a rogram Guidelines.	adhere to all the Statutory and TEA Program requirements as noted in the xxx
		adhere to all the Performance Measures, as noted in the xxx Program Guidelines, , any performance data necessary to assess the success of the program.
W		onic Information Resources (EIR) produced as part of this agreement will comply quirements as specified in 1 TAC 206, 1 TAC Chapter 213, Federal Section 508 sibility Guidelines.

CDN		Vendor ID		Amendment #	
Prog	ram Req	uirements			
1. Sun milest	nmary of Pro ones, and r	ogram: Provide coles and respo	e an overview of the onsibilities, (2) strate	program to be implemented with grant funds. Include (1) program goals, deliverables, egy for coordinating efforts with Effective Advising Program Leads, (3) facilitation and supper d (4) communication strategy.	ort
			·		

CDN		Vendor ID		Amendment #	
Prog	ıram Req	uirements	, cont'd.		
miles	tones, and re	oles and respo	nsibilities, (2) strategy	w of the program to be implemented with grant funds. Include (1) program goals, deliverable for coordinating efforts with Effective Advising Program Leads, (3) facilitation and support (4) communication strategy.	es,

CDN		Vendor ID		Amendment #
Prog	ram Req	uirements	, cont'd.	
Effec	tive Advis	ing Planning	g Pilot. What are t	the process you took to identify and select districts to participate in the the key elements that informed your selection? How will you ensure that into develop an Effective Advising Program Plan?

CDN		Vendor ID		Amendment #
Prog	ram Req	uirements	, cont'd.	
				onnel: Outline the required qualifications and experience for primary project delivery of the program. Include whether the position is existing or proposed.
staffi	ing, suppli ated to sir	es and mate	erials, contracts, tr	osed budget will meet the needs and goals of the program, including for ravel, etc. If applicable, include a high-level snapshot of funds currently rt narrative describing how adjustments will be made in the future to meet

CDN			Vendor ID)	Amendment #
Prog	gram	n Req	uirement	s, cont'd.	
					How will the ESC ensure that the pilot program is integrated with other efforts? efforts will be employed to ensure district have a clear, coordinated experience?
imp	ogra leme	m Mo	nitoring: F	am requirements	oach monitor participating districts in the Pilot to ensure fidelity of and completion of deliverables? How will the EAF coach intervene, if necessary?

CDN	Vendor ID			Amen	idment #
Equitable Ac	cess and Particip	ation			
that receive se The app funded Barriers	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 program. The applicant assures that no barriers exist to equitable access and participation for any groups receiving services funded by this program. Barriers exist to equitable access and participation for the following groups receiving services funded by this grant, as described below.				
Group			Barrier		
Group			Barrier		
Group			Barrier		
Group			Barrier		
PNP Equitab	le Services				
Are any private	e nonprofit schools	located wit	nin the applica	ant's boundaries?	
○ Yes	○No				
•	d "No" to the precedir e nonprofit schools		=	have completed the section. Proceed to the next page. am?	
○ Yes	○ Yes ○ No				
If you answered "No" to the preceding question, stop here. You have completed the section. Proceed to the next page.					
5A: Assurances					
The LEA assures that it discussed all consultation requirements as listed in Section 1117(b)(1) and/or Section 8501(c)(1), as applicable, with 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	e Services Calcula	ation			
1. LEA's stude	nt enrollment				
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 program allocation					
5. LEA reserva	5. LEA reservation for direct administrative costs, not to exceed the program's defined limit				
6. Total LEA ar	6. Total LEA amount for provision of ESSA PNP equitable services (line 4 minus line 5)				
7. Per-pupil LE	7. Per-pupil LEA amount for provision of ESSA PNP equitable services (line 6 divided by line 3)				
	LEA's to	tal require	d ESSA PNP e	quitable services reservation (line 7 times line 2)	

CDN Vendor ID	Amendment #
Appendix I: Amendment Description and I	Ourpose (leave this section blank when completing the initial application for funding)
"When to Amend the Application" document be submitted for an amendment: (1) Page 1 authorized official's signature and date, (2) A of the application or budget affected by the o	e program plan or budget is altered for the reasons described in the posted on the Administering a Grant page. The following are required to of the application with updated contact information and current Appendix I with changes identified and described, (3) all updated sections changes identified below, and, if applicable, (4) Amended Budget e details can be found on the last tab of the budget template. You may duplicate this page Reason for Amendment
DEA # 304 04 400 CAC # 304 A 00	2021 2022 Effective Advising Planning Pilot