MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

**STANDARD CONTRACT FORM AND APPLICATION FOR PROGRAM GRANTS**

# PART I – GENERAL

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| **A. APPLICANT:** | ***District Code:*** |  |  |  |  |
| **ADDRESS:** | | | | | |
|  | | | | | |
| **TELEPHONE: ( )** | | | | | |

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| B. APPLICATION FOR PROGRAM FUNDING | | | | | |
| **320** | **Supplementary Support to School Districts with High Concentrations of At-Risk Students: MassGrad Promising Practices Grant** | **PROJECT DURATION** | | | **AMOUNT**  **REQUESTED** |
| **FY2018** | FEDERAL GRANT  **administered by the**  OFFICE OF COLLEGE CAREER and TECHNICAL EDUCATION | **FROM**  **Upon Approval** | | **TO**  **8/30/18** |  |
|  |  |  | |  |  |
| C. I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT AND COMPLETE; THAT THE APPLICANT AGENCY HAS AUTHORIZED ME, AS ITS REPRESENTATIVE, TO FILE THIS APPLICATION; AND THAT I UNDERSTAND THAT FOR ANY FUNDS RECEIVED THROUGH THIS APPLICATION THE AGENCY AGREES TO COMPLY WITH ALL APPLICABLE STATE AND FEDERAL GRANT REQUIREMENTS COVERING BOTH THE PROGRAMMATIC AND FISCAL ADMINISTRATION OF GRANT FUNDS. | | | | | |
| **AUTHORIZED SIGNATORY:** | | | **TITLE:** | | | |
| **TYPED NAME:** | | | **DATE:** | | | |

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| DATE DUE: September 29, 2017  **Proposals must be received at the Department by 5:00 p.m. on the date due.** |
| Email complete proposal in PDF format to:  Carrie Harrington [charrington@doe.mass.edu](mailto:charrington@doe.mass.edu) by 5PM on Friday, September 29th, 2017 |