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 |
| **FUND** **CODE** | **PROGRAM NAME** | **PROJECT DURATION** | **AMOUNT** **REQUESTED** |
| **FY2019** | COMPETITIVE Systems for Student Success Initiative **administered by the**Systems for Student Success Office | **FROM****Upon Approval** | **TO****6/30/19** |  |
|  |  |  |  |  |
| 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: October 15, 2018**Proposals must be received at the Department by 5:00 p.m. on the date due.** |
| **Mail the FUND CODE 248 proposal listed on this signature page to:**Rebecca Shor**Systems for Student Success Office**Massachusetts Department of Elementary and Secondary Education75 Pleasant StreetMalden, MA 02148-4906Number of sets: 1  |

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