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| **Name of Grant Program:** Emergency Impact Aid for Displaced Students **Fund Code:** 312 |

#### FY19 District Application

1. **Contact information:**

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| District name |  |
| Grant contact  (name, phone and email) |  |

1. **Quarterly Numbers of Displaced\* Students**

**NOTE:** Districts must provide any updated enrollment data generally and any unreported fourth quarter data for the 2017-18 school year once that data becomes available but no later than **June 15, 2018**. Additional details will be forwarded to all applicants.

For each quarter, report the number of displaced students as of the reporting date for that quarter. Districts must submit enrollment data for all four quarters of the 2017-18 school year, which may include estimated data for the fourth quarter.

* 1. **Public School Students**

Please provide total numbers of displaced\* students in the district by category for each quarter listed below **ONLY for those students displaced by Hurricane Harvey or the 2017 California wildfires**. **DO NOT include students displaced by Hurricanes Irma or Maria (see NOTE below for exception.)** The Massachusetts Department of Elementary and Secondary Education (DESE) collected counts of students displaced by Hurricanes Irma and Maria as part of the February data submission for [state aid](http://www.doe.mass.edu/finance/chapter70/foundation/fy2018-relief.html) for these students. DESE will include these previously reported students in the district’s total counts for this federal grant program.

**NOTE:** Districts that did not submit counts of students displaced by Hurricanes Irma or Maria to DESE in February **SHOULD** include them below and include a note to that effect.

| **District Students** | **Quarter 1**  **By Oct. 2, 2017** | **Quarter 2**  **By Dec. 1, 2017** | **Quarter 3**  **By Feb. 1, 2018** | **Quarter 4**  **By Apr. 1, 2018** |
| --- | --- | --- | --- | --- |
| Total number of displaced students enrolled in elementary and secondary schools in the district:   * who are not receiving special education and related services consistent with IDEA, and * who are not English learners |  |  |  |  |
| Total number of displaced students enrolled in elementary and secondary schools in the district:   * who are receiving special education and related services consistent with IDEA |  |  |  |  |
| Total number of displaced students enrolled in elementary and secondary schools in the district:   * who are not receiving special education and related services consistent with IDEA, and * who are English learners |  |  |  |  |

* 1. **Non-Public School Students**

Please provide total numbers of displaced students attending non-public schools in the district by category for each quarter listed below. Include students displaced by Hurricanes Irma, Maria and/or Harvey or by the 2017 California wildfires.

Please see the *Additional Information* section of the Request for Proposals and the *Assurances*below for the required procedures and forms to be used for identifying and making payments for eligible non-public school students.

| **Non-Public School Students** | **Quarter 1**  **By Oct. 2, 2017** | **Quarter 2**  **By Dec. 1, 2017** | **Quarter 3**  **By Feb. 1, 2018** | **Quarter 4**  **By Apr. 1, 2018** |
| --- | --- | --- | --- | --- |
| Total number of displaced students for whom the district expects to provide payments to Individual Emergency Impact Aid Accounts, and   * who are not receiving special education and related services consistent with IDEA, and * who are not English learners |  |  |  |  |
| Total number of displaced students for whom the district expects to provide payments to Individual Emergency Impact Aid Accounts, and   * who are receiving special education and related services consistent with IDEA |  |  |  |  |
| Total number of displaced students for whom the district expects to provide payments to Individual Emergency Impact Aid Accounts, and   * who are not receiving special education and related services consistent with IDEA, and * who are English learners |  |  |  |  |

\***Displaced Students** (the students for whom a [State Education Agency] may receive payments) are students who:

* on the date that is one week prior to the date that the major disaster or emergency was declared for the area, resided in an area for which the Federal Government later declared a major disaster or emergency related to a covered disaster or emergency; and
* as a result of their displacement by a covered disaster or emergency, are enrolled in an elementary school or secondary school other than the school that the student was enrolled in, or was eligible to be enrolled in, on the date that is one week prior to the date that the major disaster or emergency was declared for the area.

*(Definition from USED)*

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#### Assurances

* I certify that the district has/will contact all non-public schools within the district’s boundaries to notify them of the availability of funding under this program; and that the district has/will review(ed) documentation to verify the eligibility of any non-public school students included in counts in this application as meeting the definition of displaced students, as defined in Section 107(b)(1) of Title IV of Division B of Public Law 109-148, as modified by Division B, Subdivision 1, Title VIII of P.L. 115-123, the “Bipartisan Budget Act of 2018.”
* I certify that the district will make payments to Individual Emergency Impact Aid Accounts for students enrolled in non-public schools who are counted on this application within 14 calendar days of the school district’s receipt of funds provided for this application.

* I certify that public school student counts included in this application and previously submitted to the DESE meet the definition of displaced students.

* I certify that the statements and all of the data included in this application are, to the best of my knowledge and belief, true, complete, and correct. I certify that I am authorized to make the representations and commitments in this application, for and on behalf of the applicant, and otherwise to act as the applicant’s authorized representative in submitting this application for funding.

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| **Superintendent’s Signature** | **Date** |
| **Superintendent Name:** | |
| **School District:** | |