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| **PART IIIA- REQUIRED PROGRAM INFORMATION FISCAL YEAR 2019-2020 (FY20)** |

*This application will serve as the year-end evaluation and continuation grant application for recipients of any the following:*

* *FY 18 & FY19 (ELT & OST)* *Fund Code (FC) 647 (competitive for new sites) , FC 646 ( competitive exemplary grant) and/or FC645 ( continuation grant).*
* ***Deadline to submit this Part III is Friday August 9, 2019. Budgets will not be processed until all required information is submitted.***

1. **PROGRAM SUMMARY**

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| **School District /  Applicant Agency** |  | | | | |
| **Program Coordinator / Contact** |  | | | | |
| **Cell Phone** |  | | **Email** |  | |
| **Total Number of  ELT sites for which you are applying for continuation funding** |  | ***ELT* Amount requested for SY 9/1/2019- 6/30/2020** | | **Amount requested for Summer**  **7/1/2020 - 8/31/2020** | **Total Requested ELT** |
|  | |  |  |
| **Total Number of  OST sites for which you are Applying for continuation funding.** |  | ***OST* Amount requested**  **SY 9/1/2019- 8/31/2020:** | | |  |
| **Total FC645 Funds requested** | | | | |  |

**II. PROGRAM Information**

Grantees are required to continue to designate a full - or part-time coordinator (depending on the number of funded sites) whose primary role is to oversee both the programmatic and administrative aspects of the grant including overseeing the site(s), evaluation and data collection, submission of required materials including continuation grants, and attending required meetings/trainings. (See Addendum B – Grant Assurances).

1. If there will be or it’s anticipated there will be a change in the district and /or site facilitator positon in FY20 provide the following:

* A description of the qualifications/credentials that the district/agency will seek for the required coordinator/facilitator position. If the applicant currently has a person that will serve in this capacity, describe their qualifications/credentials including any previous experience.
* Describe the transition plan and the type of support that will be provided to the new coordinator/facilitator.
* If the district coordinator will be a part time position, please indicate as such and describe the process to assure that there is sufficient time allotted to meet the requirements of this grant.
* If there will be no change in the district 21st CCLC Coordinator please indicate NA.

1. Please describe any other changes or anticipated changes that may/will affect the district and/or program site such as change in leadership, redistricting, change in grade levels served at the school, consolidation, etc.
2. For **SY19** indicate if your site(s) provided services to private schools or private school students/teachers in your geographic vicinity. If yes, describe the service provided. If applicable, include the number of students served from private schools. *As you are aware, federal law mandates that private school administrators be consulted regarding programs and services provided through the 21st CCLC grant.*

**III. SY SCHOOL/SITE DATA REPORTING**

1. **Demographic Data** – **OST** please complete for SY programming, **ELT** please compete for school vacation week programming supported using the additional funds (20K).

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| --- | --- | --- | --- | --- | --- |
| **Site** | **Total students served** | **FY19**  **mean hours** | **FY19 % econ. disadv.** | **FY19**  **% els served** | **FY19**  **% sped served** |
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1. OST and ELT**please copy, paste the charts below, and complete for ALL** sites funded in FY19. Complete chart for the Academic and SEL SAYO outcomes for which data was collected.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SITE NAME** | | | | **Prom Site** | | | **Prac Site** | | | **Demo Site** | | | **SPED Enhancement** | | |
|  | | | |  | | |  | | |  | | |  | | |
| **School Year SAYO-Teacher** | | | | | | | | | | | | | | | |
| **Academic** | # Students | Pre Mean | Post Mean | % Change Pre to Post | |  | | |  | | |  | | |  |
| **ELA** |  |  |  |  | |  | | |  | | |  | | |  |
| **MATH** |  |  |  |  | |  | | |  | | |  | | |  |
| **HW** |  |  |  |  | |  | | |  | | |  | | |  |
| **SEL** | **Eng. in Learning** | **Leader- ship** | **Persev-erance** | **Self Reg** | **Critical Thinking** | | | **Comm. Skills** | | | **Rel. w/ peers** | | | **Rel. w/ Adults** | |
| # Students |  |  |  |  |  | | |  | | |  | | |  | |
| Pre Mean |  |  |  |  |  | | |  | | |  | | |  | |
| Post Mean |  |  |  |  |  | | |  | | |  | | |  | |
| % Change Pre to Post |  |  |  |  |  | | |  | | |  | | |  | |

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| **School Year SAYO-Staff** | | | | | | | | |
| **SEL** | **Eng. in Learning** | **Leader- ship** | **Persev-erance** | **Self Reg.** | **Critical Thinking** | **Comm. Skills** | **Rel. w/ peers** | **Rel. w/ Adults** |
| # Students |  |  |  |  |  |  |  |  |
| Pre Mean |  |  |  |  |  |  |  |  |
| Post Mean |  |  |  |  |  |  |  |  |
| % Change Pre to Post |  |  |  |  |  |  |  |  |

***Insert additional charts here***

**Note: ELT, if the additional funds (20K) were used to support school vacation week programming, please respond to questions 6-8 specific to that programming and 9-11 for sy programming. OST please respond to all questions for SY 19 programming.**

1. Did each school/site serve the anticipated number of participants you had expected? *If* ***not****, provide a brief explanation as to why*.
2. Did the population of students (percentage) who are economically disadvantaged, SPED, and/or English learners match or preferably exceed that of the school? If not, this may be an area that you want to consider targeting for improvement in FY20.
3. Did students attend on a regular and consistent basis (SY 100 hrs. for Elementary, 90 hrs. for MS and 100 hrs. for HS and at least 80% of the summer/vacation program hours offered)? If **not**, provide a brief explanation as to why. If not, this may be an area that you want to consider targeting for improvement in FY20.
4. Did each site meet the minimum required sample size of 50 for the SAYO data collection? If not, provide a brief explanation as to why. If not, this may be an area that you want to consider targeting for improvement in FY20. (Note: If a site serves less than 50 students, everyone should have been sampled.)
5. Was all required data and forms submitted by due dates? If not, provide a brief explanation as to why. If not, this is an area that you want to consider targeting for improvement in FY20.
6. Describe the process used to implement the APT (Assessment of Program Practices Tool). Include the APT team members, number of observations conducted, and a synopsis of the findings, (strengths and areas for improvement) for each site. If the required APT observation was not conducted, explain why.
7. For each site, use the chart below to summarize at least one of the program’s most successful projects/enrichments/ accomplishments during SY19. Add additional rows as needed.

| **Site** | **Activity/**  **Project Name** | **Brief Description** |
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**IV. MENTORING [*Exemplary (Promising, Practitioner, and Demonstration) Sites ONLY . All other sites - skip to Q15]***

1. For FY19, did each Promising, Practitioner, and Demonstration site meet the mentoring requirements including conducting a peer APT visit and submitting it through Survey Gizmo? List the date(s) in which the peer APT visit(s) occurred and the school(s) visited.
2. Document and describe any mentoring and related activities conducted by the district and/or site coordinator(s) during the program year ending August 31, 2019. Activities may include serving as a mentor, coach, resource, support for a site/organization interested in applying for a 21st CCLC grant, presenting at a promising practices forum, training, TA session, and/or conference.

*Please Note- Conducting or hosting a site visit may also constitute mentoring, coaching, or serving as a resource if you are able to document that sufficient time was spent debriefing.*

**V. SUSTAINABILITY**

1. Describe strategies employed to sustain the program beyond the funding cycle.

* including how the 21st CCLC funds are coordinated with other district/local/private funds in order to align and leverage resources, improve program quality, and develop shared outcomes for success [e.g., other federal/public/private funding, McKinney-Vento, Title I, Title III, Title IVA, Adult Basic Education, After-School and Out-of-School Time Quality (ASOST-Q) grants, Department of Early Education and Care, etc.].

**VI. BUDGET**

1. If grant funds were used to purchase any type of electronic equipment such as laptops, hand held devices (iPads, chrome books, etc.), cameras, printers, drones or other types of media equipment you are required to have a process in place to inventory and track these items.

* Please attach to your grant submission an inventory of electronic items purchased.
* Describe the process you currently use, or will be using, to inventory and track electronics purchased with grant funds.
* Describe below how the items were /are used to enhance the program and learning.

1. **OST ONLY –PROGRAM FEES**

**As per federal requirements, any program that charges families a fee to attend a federally funded 21st CCLC program must adhere to the following guidelines:**

* All income must be expended during the grantee’s award period to supplement, enhance, or otherwise improve 21st CCLC programming for students and families, and not to supplant other funding sources. This may include but is not limited to educational field trips, additional qualified staff to support diverse learners all ability levels, summer programming, and transportation costs.
* Grantees MUST take into account the relative poverty of the students served by their 21st CCLC programs, and those students that are eligible to free lunch will be provided access to the program at no cost and a sliding fee scale will be established for all others. Grantees are encouraged to utilize the sliding fee scale for income eligible families established by the Department of Early Education and Care as a guide for developing a fee schedule.
* In all program related materials, subrecipients must clearly state that the out-of-school time is funded through a federal 21st CCLC Grant and that any child eligible for free lunch may attend the program at no cost.
* Demonstrate that there are established procedures in place for monitoring, accounting and reporting of program income.
* Program income generated without prior approval from the State Education Agency or does not adhere to the above criteria will be used to proportionally reduce the federal award.
* As part of the reporting process, grantees will also be required to report on program income generated, and expenditures related to 21st CCLC program operations.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Did one or more of the funded sites charge families/students a fee to attend? | | | | | | YES | NO |
|  |  |
| **If you answered Yes to the above, please provide the information below. If you responded NO, skip to Section II.** | | | | | | | |
| In the space below please list the school(s)/site(s) that charged a fee for families to attend their 21st CCLC program in FY2019. | | | | | | | |
|  | | | | | | | |
| If yes, check all that apply | SY 2019 |  | Summer 2019 |  | By checking this box we conform that students eligible for free lunch were not charged a fee to attend in FY19? | |  |
| Please indicate the per student cost to attend the program. | | $ | | Indicate the % of students that paid a fee to attend in FY2019 | | % | |
| Please proved the total amount of funds generated for School Year 2019 | | $ | | Please proved the total amount of funds generated for Summer 2019 | | $ | |

1. Please describe the process for determining the per student cost to attend, if a sliding fee is used, and how you ensure that families of children/youth that would be eligible to receive free or reduced price lunch fully understand that cost should not be a deterrent from participation.
2. Describe the procedures in place for monitoring, accounting and reporting of program income. Be specific in describing how those funds are/will be used to supplement current program expenditures (e.g., stipends for 1 staff position, educational field trip fees, etc.).

**BUDGET RELATED REMINDERS**

* All costs must be reasonable and necessary to implement program activities.
* Budget narratives must demonstrate clear and specific links to the project activity plan.  Please be as specific as possible describing budgeted materials and supplies. Additionally,
* Out of state travel to attend conferences, other than those sponsored or supported by the U.S Department of Education’s is not an allowable use of funds.
* Purchase of electronics must be justified and demonstrated that these items are not available through other means.
* Field trips are an allowable expense provided they are educational, connect to and support program activities and outcomes. Out of state field trips must be approved in advance by the Department’s 21st CCLC Program Coordinator. Field trip expenses should be budgeted under other costs Memberships/Subscriptions/Computer Licenses.
* Funds allocated under this program may be used only to supplement, not supplant, funds that local schools and community-based organizations would otherwise expend for programs of this type. Rental of space, cash stipends to students to attend the program, cell phones, telephone and utilities, overhead costs and the purchase of materials that are typically part of the school day or the responsibility of the school/district are not allowable expenses under this grant. Use of grant funds for to pay for food for celebrations is not allowed.