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| PART III – REQUIRED PROGRAM INFORMATION |

This application for continuation grant funds includes year-end program reporting for fiscal year 2021 (School Year 2020-2021 and Summer 2021) grant activities, as well as proposed activities for FY2022 (School Year 2021-2022 and Summer 2022). Proposed activities for FY2022 should be informed by lessons learned and program evaluation results from your current grant.

**DUE DATE: September 30, 2021**

**ONLINE SUBMISSION**

In order to facilitate the compilation of data related to the grant, some additional information not included in this Part III is also required for your fiscal year 2021-2022 (FY2022) grant application; this additional information must be submitted online. This includes information about FY2021 implementation and plans for FY2022.

***The data report must be submitted online using the following link by the same due date noted above:*** [***https://survey.alchemer.com/s3/6434066/FY2021-ASOST-Q-FC530-Year-End-FY2022-Continuation-Data-Report***](https://survey.alchemer.com/s3/6434066/FY2021-ASOST-Q-FC530-Year-End-FY2022-Continuation-Data-Report)

**CATEGORIES:** Please respond to the questions based on your corresponding funding category. As a reminder, Category A = Quality Enhancements or Category B = Professional Development/Networking.

1. **Organization Name:**
2. **Timeframe (FY2022 Plans): Please indicate the timeframe during which FY2022 enhancements will take place. (Check all that apply.)** Note: If proposing both school year and summer grant activities, please be sure to submit a Part I (Standard Contract / Signature Page) and Part II (Budget/Budget Narrative) for each timeframe. Both of these are in the Part I/II Excel Workbook found in the Required Forms section of the Funding Opportunity RFP.
* School Year (09/01/2021\* - 06/30/2020) \*start date cannot before submitted in EdGrants
* Summer (07/01/2022 - 08/31/2022)
1. **Start and End Dates (FY2022 Plans):** Please note the start and end dates for your school year and/or summer programs funded through this ASOST-Q continuation grant. This will help in our planning for any possible site visits next year.

School Year Start Date:

 School Year End Date:

 Summer Start Date:

 Summer End Date:

1. **FY2021 Success Stories (maximum 600 words, ~1 page):** Please provide a brief summary of the implemented program enhancement(s) [Category A] or professional development offerings [Category B] and resulting successes*.*
2. **FY2021 Lessons Learned (maximum 600 words, ~1 page):** Please describe lessons learned that will inform next year’s program improvements and enhancements [Category A] or professional development offerings [Category B]. Where applicable, include an analysis of the data collected from program or PD evaluation activities, including, but not limited to, the grant-required APT-O [Category A].
3. **FY2021 Outcomes:** Please briefly summarize the outcomes you have achieved as a result of implementing your program enhancement(s) [Category A] or professional development offerings [Category B]. Please also address if there were any outcomes that were anticipated but not achieved, as indicated by your responses to the outcome question in the [data report](https://survey.alchemer.com/s3/6434066/FY2021-ASOST-Q-FC530-Year-End-FY2022-Continuation-Data-Report) that is also linked to above.
4. **(FY2022 Plans) Total Funding to Support ASOST-Q Programming:** Please complete the chart below describing **all** funds that support the ASOST-Q programming that is being enhanced through this grant.  Please indicate the amount of funding, and in the “Source(s)” column briefly list the sources.  Please do not include the amount you are requesting from this proposal.

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|  | **Total Amount** | **Source(s)** |
| Federal (include 21st cclc here) |  |  |
| State (include Early Education and Care (EEC) contracts/vouchers here) |  |  |
| Local |  |  |
| Private (include foundation grants, private donations, etc.) |  |  |
| Tuition |  |  |
| Other |  |  |

**IMPORTANT NOTE:** Please respond to the remaining questions **based on your category of funding. Category A (Quality Enhancements) = A1&2 (page 3) and Category B (Professional Development/Networking) = B1-3 (page 4).**

**Category A (Quality Enhancements) ONLY:** Continuation grant funds must be used to continue or support new **quality enhancements** to ASOST programming during the school year and/or summer (upon approval through August 31, 2022.)

**Reminders:**

* Proposed activities should be **quality enhancements** to existing programming and aligned to the Purpose/Priorities outlined in the RFP/Funding Opportunity.
* Proposed quality enhancements should be informed by FY2021 program evaluation and lessons learned.
* Proposed quality enhancements may continue/build upon FY2021 funded activities.
1. **FY2022 Quality Enhancement Areas**: In which of the following areas will program enhancements be implemented using grant funds? (Check all that apply.)
* Comprehensive Academic, Social-Emotional, Health/Wellness and Enrichment Services
* Partnerships with Schools, Community-Based Organizations and Families
* Serving Special Populations
* Family Engagement
* Highly Qualified Staff
* Evaluation Systems
* Cultural Responsiveness and Equity/Anti-Racism
1. **FY2022 Quality Enhancement Plans (maximum 2 pages):** Using the chart below, and based on the lessons learned that are described above, please provide a description of the proposed program quality enhancements (including for each: anticipated outcomes, budget justification) for FY2022 grant funds request.

***Reminders:***

* *Activities proposed should directly align to the quality enhancement areas selected above.*
* *Activities may build upon/continue quality enhancements that were implemented in FY2021. Be sure to provide updated anticipated outcomes based on any progress made to date.*

**Instructions/Tips:** Responses may be in bulleted or paragraph form. Cells will expand to fit the text you type. Please do not change the column widths. ***Delete or add rows as needed.***

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| **Proposed Enhancement Activity (and Enhancement Area):**Please provide a brief description (1-2 paragraphs) of each proposed enhancement activity. | **Anticipated Outcome(s):**Briefly describe what change(s) is (are) expected as a result of the enhancement activity?  | **Grant Budget Justification:**Briefly describe how grant funds will support the enhancement activity. |
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**CATEGORY B (Professional Development/Networking):** Continuation grant funds must continue to be used to support ASOST programs, including those receiving ASOST-Q Category A (**quality enhancements)**,as they work to improve the quality of their programming.

**Reminders:**

* Providers, where possible and applicable, should align their offerings to the Department of Elementary and Secondary Education (Department’s) [Standards for High Quality Professional Development](http://www.doe.mass.edu/pd/standards.html). If sessions that do not meet the definition are being offered, include a brief rational in the description.
* Information about all offerings (description, dates, registration process) should be forwarded to the Department once finalized for dissemination).
	+ - 1. **FY2021 Summary:** Please provide the following information about each of the PD, T/TA and Networking sessions offered during FY2021. Include each training series as one entry.  If you need additional rows, please insert.

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| **Session Title** | **Date(s)** | **Total # of Participants** | **Brief summary of the participants' feedback / evaluation of the session** |
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* + - 1. **FY2022 Quality Enhancement Areas**: In which of the following areas will PD, TA, or networking be provided using grant funds? (Check all that apply.)
* Comprehensive Academic, Social-Emotional, Health/Wellness and Enrichment Services
* Partnerships with Schools, Community-Based Organizations and Families
* Serving Special Populations
* Family Engagement
* Highly Qualified Staff
* Evaluation Systems
* Cultural Responsiveness and Equity/Anti-Racism
	+ - 1. **FY2022 Proposed Sessions and Timeline:** Please use the chart below to provide a description of the proposed PD, T/TA and Networking to be *provided using this grant funding*. Add rows as needed.

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| **Title** | **Description** | **Dates & Hours** (estimate if not yet known) | **Audience**(e.g., OST direct staff, coordinators, etc.) | **Session format(s)**(e.g., face-to-face, virtual) | **Estimated capacity**(# of participants) |
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***Important Note: All costs associated with offering proposed opportunities should be supported with the grant request and/or through in-kind/matching sources. The Department will not provide any additional funding for space or materials. Fees may not be charged to participants for these opportunities (with the exception of nominal fees to cover food costs only if provided).***