# PART III – REQUIRED PROGRAM INFORMATION

**District Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **District/Entity:** |  | **Program Coordinator**:  |  |
| **Email Address:** |  |
| **We are applying for the following funding (check all that apply)**  | 1. **Internship Pilot Project**
 |  | 1. **Increased access**
 |  |
| **amount Requested** 1. **Internship Pilot**
 | **$** | **Amount Requested** **B. increased access** | **$** | **Total** **Funding request (A +B)** | $ |

|  |  |
| --- | --- |
| Total current 21st CCLC grant funds to be used to support the summer program | $ |
| Total other funding sources (non-21st CCLC) | $ |
| **site name****(add rows if needed)** | **grades served** | **number of unduplicated students served summer 2021**  | **number of unduplicated students expected to be served summer 2022** | **this site is applying for Increased Access (Y=yes/N=no)** | **this site will participate in Internship pilot****(Y/N)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **Summer Internship Pilot Applicants – please respond to the following questions (1-5).**
2. Please provide a detailed description of your plan to develop and administer a summer internship program. Include the following:
* Planning team members
* Strategies for recruiting interns [reminder: application may propose to support a combination of high school (HS) and college interns but cannot support college interns only.]
* Selected population and grade levels of students that will be the focus of your recruitment. Please note interns should be representative of the population of students this grant is intended to serve.
* Estimated number of interns
1. Describe what you envision to be the role of the intern(s) in the 21st CCLC summer program. (Interns may serve as teaching assistants, academic and social supports, mentors, etc.). Include the estimated hours per week and total internship hours.
2. Describe plans and timeline to recruit and hire an internship coordinator. Include qualifications you will be seeking for this role. If you already have someone in mind for this role, describe their qualifications and experience.
3. Describe plans to connect internship program to any of the following:
* Work Based Learning Plans
* [MYCAP](https://www.doe.mass.edu/ccte/ccr/mycap/) (My Career and Academic Plan)
* Internship Credits for participating students
1. Describe the process and timeline for training student interns and continued supervision. **Note:** To ensure the health and safety of staff and students, interns will be required to be trained to follow all established health and safety protocols.
2. Describe the process that will be used to provide student interns with the opportunity to discuss challenges and success, and to reflect on their internship experience for deeper engagement and learning.
3. **Increased Access to Summer Programming Applicants - please respond to the following questions (7-11).**
4. Describe why these additional funds are needed to support summer programming. Applicants must be able to demonstrate that Fiscal Year (FY) 2022 21st CCLC funds will be fully expended, and you will not be returning funds.
5. Describe the planning process for writing and designing the proposed summer program. Include who was involved in the planning/design process and their specific role in the development of this proposal (district personnel, school personnel, partners, etc.). If you will be partnering and/or contracting with schools and/or providers, they are expected to be involved in the development and design of the program.
6. Identify the specific elements of the school strategic plans that are supported through this funding opportunity and describe how this grant enhances those efforts. In responding to this question describe connections to district/school/community strategies related to addressing student and family needs as a result of COVID-19.
7. Describe the ways in which this grant will be coordinated with other district/school summer initiatives in order to align and leverage resources, improve program quality, and develop shared outcomes for success. **Note:** If you are a community-based organization (CBO), please work with the school/district to identify these resources.
8. How often will students be required to attend? . Describe planned strategies for student outreach and sustained attendance. Reminder students are required to attend a minimum of 80% of total summer programming hours offered

**Please complete the SchOol/Site SUmmer Program OveRVIEW SECTIONS BELOW FOR EACH SCHOOL/SITE FOR WHICH YOU ARE APPLYING FOR INCREASED ACCESS FUNDING.**

**SchOol/Site SUmmer Program Overview**

Please address each of the following questions specific to each applicant site. Responses should be provided within this document, without changing the format or font size, and leaving the questions above each response

|  |  |
| --- | --- |
| School/Site Name |  |

1. Please provide a very brief description (no more than 150 words) of the proposed summer program model and highlight the types of engaging practices/programming to be provided. **Please have the description begin with the following sentence, filling in the blanks with the appropriate information**:

*[School Name] will implement an enhanced summer program serving [students] in grades [grade levels]* providing ….…..

**PROGRAM DEVELOPMENT AND IMPLEMENTATION**

1. How will the summer program contribute to deepening learning for students.
2. Describe with detail the specific enhancement(s) that these grant funds will be used to support. Include how social emotional learning supports that will be integrated into the programming provided.
3. How will the program create a welcoming environment that demonstrates an understanding of diverse cultures, backgrounds, and languages? Include the following in your response:
* How programming will reflect a variety of learning needs and styles.
* How the program will support students social emotional learning/mental health needs.
1. Use the chart below to provide the proposed hours of operation for the summer program.

|  |  |  |  |
| --- | --- | --- | --- |
| **Program Dates** | **Program Times** | **Days of week**  | **Total # Hours** **(hrs/wk x** **# wks)** |
| **Start Date:** |  | **From:** |   | **Mon** | **Tues** | **Wed** | **Thurs** | **Fri** |  |
| **End Date:** |  | **To:** |  |  |  |  |  |  |

1. Describe current partnerships as they relate to the implementation of the summer program. Complete the Partners/Contractors Chart below; add more rows as needed).

|  |
| --- |
| **Partners/Contractors ( Ad rows if needed)** |
| **Partner/Contractor Name** | **Area of Expertise/Role in Summer Program** |
|  |  |
|  |  |

1. Describe the staffing for the proposed program and services. Complete the chart belowindicating the number of staff and credentials

|  |
| --- |
| **Type of staff that will be utilized** *(Check all that apply):* |
| **School day** **teachers** | **School day** **paraprofessionals** | **Out-of-School Time** **Educators** | **Other** **(please specify)** |
|  |  |  |  |
| **Indicate the projected number of certified teachers in the following areas** |
| **Math** | **ELA** | **Science** | **Art** | **History/ Soc. Sci.** | **Health/PE** | **Other (List Licensure)** |
|  |  |  |  |  |  |  |