2024-2025 Effective Advising Planning Grant
Letter of Interest (LOI) Application Due 11:59 p.m. CT, June 7, 2024

NOGA ID

Authorizing legislation

Application stamp-in date and time

This LOI application must be submitted via email to **competitivegrants@tea.texas.gov.**

The LOI application may be signed with a digital ID or it may be signed by hand. Both forms of signature are acceptable.

TEA must receive the application by **11:59 p.m. CT, June 7, 2024**.

Grant period from   **September 1, 2024 - August 31, 2025**

Pre-award costs permitted from   **Pre-Award Costs Are Not Permitted**

Required Attachments (linked along with this form on the TEA Grants Opportunities page)

Excel workbook with the grant's budget schedules
Attachment 1: Planning Grant Agreement

Amendment Number

Amendment number (For amendments only; enter N/A when completing this form to apply for grant funds):

Applicant Information

Organization _____ CDN _____ Campus _____ ESC _____ UEI _____

Address _____ City _____ ZIP _____ Vendor ID _____

Primary Contact _____ Email _____ Phone _____

Secondary Contact _____ Email _____ Phone _____

Certification and Incorporation

I understand that this application constitutes an offer and, if accepted by TEA or renegotiated to acceptance, will form a binding agreement. I hereby certify that the information contained in this application is, to the best of my knowledge, correct and that the organization named above has authorized me as its representative to obligate this organization in a legally binding contractual agreement. I certify that any ensuing program and activity will be conducted in accordance and compliance with all applicable federal and state laws and regulations.

I further certify my acceptance of the requirements conveyed in the following portions of the LOI application, as applicable, and that these documents are incorporated by reference as part of the LOI application and Notice of Grant Award (NOGA):

☐ LOI application, guidelines, and instructions   ☐ Debarment and Suspension Certification

☐ General and application-specific Provisions and Assurances   ☐ Lobbying Certification

Authorized Official Name _____   Title _____

Email _____   Phone _____

Signature *Carrie Holland*   Date _____

Shared Services Arrangements

[ ] Shared services arrangements (SSAs) are permitted for this grant. **Check the box below if applying as fiscal agent.**

[ ] The LEA or ESC submitting this application is the fiscal agent of a planned SSA. All participating agencies will enter into a written SSA agreement describing the fiscal agent and SSA member responsibilities.

Statutory/Program Assurances

The following assurances apply to this program. In order to meet the requirements of the program, the applicant must comply with these assurances.

Check each of the following boxes to indicate your compliance.

[ ] 1. The applicant provides assurance that program funds will supplement (increase the level of service), and not supplant (replace) state mandates, State Board of Education rules, and activities previously conducted with state or local funds. The applicant provides assurance that state or local funds may not be decreased or diverted for other purposes merely because of the availability of these funds. The applicant provides assurance that program services and activities to be funded from this LOI will be supplementary to existing services and activities and will not be used for any services or activities required by state law, State Board of Education rules, or local policy.

[ ] 2. The applicant provides assurance that the application does not contain any information that would be protected by the Family Educational Rights and Privacy Act (FERPA) from general release to the public.

[ ] 3. The applicant provides assurance to adhere to all the Statutory and TEA Program requirements as noted in the 2024-2025 Effective Advising Planning Grant Program Guidelines.

[ ] 4. The applicant provides assurance to adhere to all the Performance Measures, as noted in the 2024-2025 Effective Advising Planning Grant Program Guidelines, and shall provide to TEA, upon request, any performance data necessary to assess the success of the program.

[ ] 5. The applicant assures that any Electronic Information Resources (EIR) produced as part of this agreement will comply with the State of Texas Accessibility requirements as specified in 1 TAC 206, 1 TAC Chapter 213, Federal Section 508 standards, and the WCAG 2.0 AA Accessibility Guidelines.

CDN [   ]   Vendor ID [   ]   Amendment # [   ]

Program Requirements

1. **Summary of Program**: a) Provide an overview of the program to be implemented with grant funds. b) Describe how this program will support individual planning in the context of comprehensive school counseling. c) Describe how this program will foster innovation in CTE programming and/or promote careers pathways aligned to high-skill, high-wage careers or industries.

Program Requirements, cont'd.

2a. **Project Leadership:** 1) Explain the **EAF Coach** selection. Include the following: Who will serve as the EAF Coach(es)? What are this person's qualifications and what is your justification for selecting them as the EAF Coach? What percentage of time will the EAF Coach(es) be allocated to this project? Include any other roles the EAF Coach holds and the percentage of time they are allocated to other projects, not to exceed 100%. If selecting more than one EAF Coach, indicate which district(s) each coach will be held accountable for supporting for the duration of the grant cycle.

2) Provide an overview of the **EAF Coach Strategy** for implementing this project. Include the following: What is the training and communication strategy the EAF Coach(es) will use to ensure participating districts fulfill their commitments to the deliverables of this project? How will the EAF Coach(es) monitor progress toward completion of deliverables? How will an EAF Coach intervene, if necessary, with districts who are not meeting expectations?

3) Provide an overview of the **ESC's strategy** for overseeing this project. Include the following: How will the ESC ensure the EAF Coach(es) have the necessary time and resources to successfully complete all grant requirements? How will the ESC monitor the performance of the EAF Coach(es) and track progress toward grant deliverables? What protocol and strategy will be followed if the ESC recognizes the EAF Coach is at risk or if they are notified by TEA that an EAF Coach is at-risk? What steps will be taken if the ESC does not retain the selected EAF Coach(es) for the entirety of the grant? How will the ESC ensure the grant project is integrated with other internal efforts?

Program Requirements, cont'd.

2b. **District Leadership**: 1) Provide an overview of the selection process for **partner school districts**. Include the following: an outline of the process you undertook to select partner districts, reasoning behind your selection, considering key elements such as current initiatives, participation in other projects, district and/or campus level leadership, etc., if any, that informed the selection.

2) Explain in detail how the districts you have selected meet the CTE defined criteria listed in the Eligible Applications section of these Program Guidelines. Include information for each criterion met by the individual districts.

3) Explain **Project Lead** selection. Who are the identified Project Leads at each partner district and what are their qualifications to serve as Project Lead? Include the strategy for each district selection of a Project Lead and how the district will ensure this person has the necessary time and resources to successfully complete grant deliverables.

Program Requirements, cont'd.

3. **Goals Objectives and Strategies**: Provide an overview of the program to be implemented with grant funds. Describe the major goals/objectives of the proposed program. What activities/strategies will be implemented to meet those goals/objectives?

Program Requirements, cont'd.

4. **Performance and Evaluation Measures**: Describe the performance measures identified for this program which are related to student outcomes and are consistent with the purpose of the program. Include the tools and data used to measure performance, as well as the processes that will be used to ensure the effectiveness of project objectives and strategies.

5. **Budget Justification:** Describe how the proposed budget will meet the needs and goals of the proposed program. Include justification for the specific funding allocations in the proposed budget and provide detail on stipends and hours expected for services rendered.

Equitable Access and Participation

Check the appropriate box below to indicate whether any barriers exist to equitable access and participation for any groups that receive services funded by this program.

○ The applicant assures that no barriers exist to equitable access and participation for any groups receiving services funded by this program.

○ Barriers exist to equitable access and participation for the following groups receiving services funded by this grant, as described below.

Group		Barrier	
Group		Barrier	
Group		Barrier	
Group		Barrier	

PNP Equitable Services

Are any private nonprofit schools located within the applicant's boundaries?

○ Yes   ○ No

If you answered "No" to the preceding question, stop here. You have completed the section. Proceed to the next page.

Are any private nonprofit schools participating in the program?

○ Yes   ○ No

If you answered "No" to the preceding question, stop here. You have completed the section. Proceed to the next page.

5A: Assurances

☐ The LEA assures that it discussed all consultation requirements as listed in Section 1117(b)(1) and/or Section 8501(c)(1), as applicable, with all eligible private nonprofit schools located within the LEA's boundaries.

☐ The LEA assures the appropriate Affirmations of Consultation will be provided to TEA's PNP Ombudsman in the manner and time requested.

5B: Equitable Services Calculation

1. LEA's student enrollment [　　]

2. Enrollment of all participating private schools [　　]

3. Total enrollment of LEA and all participating PNPs (line 1 plus line 2) [　　]

4. Total current-year program allocation [　　]

5. LEA reservation for direct administrative costs, not to exceed the program's defined limit [　　]

6. Total LEA amount for provision of ESSA PNP equitable services (line 4 minus line 5) [　　]

7. Per-pupil LEA amount for provision of ESSA PNP equitable services (line 6 divided by line 3) [　　]

LEA's total required ESSA PNP equitable services reservation (line 7 times line 2) [　　]

| **Appendix I: Amendment Description and Purpose** (leave this section blank when completing the initial application for funding) |

An amendment must be submitted when the program plan or budget is altered for the reasons described in the "When to Amend the Application" document posted on the Administering a Grant page. The following are required to be submitted for an amendment: (1) Page 1 of the application with updated contact information and current authorized official's signature and date, (2) Appendix I with changes identified and described, (3) all updated sections of the application or budget affected by the changes identified below, and, if applicable, (4) Amended Budget Request. Amendment Instructions with more details can be found on the last tab of the budget template.

You may duplicate this page

Amended Section   **Reason for Amendment**