

lexus Education Agency				
NOGA ID	Application stamp-in date and time			
TEA will only accept grant application documents by <b>email</b> , in grant applications and amendments. Submit grant application follows:	•			
Competitive grant applications and amendments to competitivegrants@tea.texas.gov.				
The application MUST bear the signature of a person authoriz applicant to a contractual agreement	ed to bind the			
Authorizing legislation: PL 117-159 Bipartisan Safer Communi	ties Act Title II School Improvement Programs, BSCA			
Grant period: From 11/15/2023 to 09/30/2025 Pr	e-award costs: ARE NOT permitted for this grant			
Required attachments: N/A				
Amendment Number				
Amendment number (For amendments only; enter N/A when	completing this form to apply for grant funds):			
1. Applicant Information				
Name of organization				
Campus name CDN	Vendor ID ESC UEI			
Address City	ZIP Phone			
Primary Contact Email	Phone			
Secondary Contact Email	Phone			
2. 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 grant application, as applicable, and that these documents are incorporated by reference as part of the grant application and Notice of Grant Award (NOGA): Grant application, guidelines, and instructions General Provisions and Assurances Application-Specific Provisions and Assurances Section-Specific Provisions and Assurances				
Authorized Official Name Title	Email			
Phone Signature	Date			
Grant Writer Name Signature	Date			
Grant writer <b>is</b> an employee of the applicant organization.	Grant writer is <b>not</b> an employee of the applicant organization.			
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## 3. Shared Services Arrangements

Shared services arrangements (SSAs) **are not** permitted for this grant.

## 4. Identify/Address Needs

List up to three quantifiable needs, as identified in your needs assessment, that these program funds will address. Describe your plan for addressing each need.

Quantifiable Need	Plan for Addressing Need

### 5. SMART Goal

Describe the summative SMART goal you have identified for this program (a goal that is Specific, Measurable, Achievable, Relevant, and Timely), either related to student outcome or consistent with the purpose of the grant.

#### 6. Measurable Progress

Identify the benchmarks that you will use at the end of the first three grant quarters to measure progress toward meeting the process and implementation goals defined for the grant.

# **First-Quarter Benchmark**

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cond-Quart	er Benchma	ark					
N		Measurable Progress	Vendor ID     Measurable Progress (Cont.)   econd-Quarter Benchmark	Measurable Progress (Cont.)	Measurable Progress (Cont.)	Measurable Progress (Cont.)	Measurable Progress (Cont.)

### **Third-Quarter Benchmark**

# 7. Project Evaluation and Modification

Describe how you will use project evaluation data to determine when and how to modify your program. If your benchmarks or summative SMART goals do not show progress, describe how you will use evaluation data to modify your program for sustainability.

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# 8. Statutory/Program Assurances

The following assurances apply to this grant program. In order to meet the requirements of the grant, the grantee 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 s (replace) state mandates, State Board of Education rules, and activities previously conducted with state or local tapplicant provides assurance that state or local funds may not be decreased or diverted for other purposes mere the availability of these funds. The applicant provides assurance that program services and activities to be funde grant will be supplementary to existing services and activities and will not be used for any services or activities re state law, State Board of Education rules, or local policy.	funds. The ly because of d from this
	2. The applicant provides assurance that the application does not contain any information that would be protecte Family Educational Rights and Privacy Act (FERPA) from general release to the public.	d by the
	3. The applicant provides assurance to adhere to all Statutory Requirements, TEA Program Requirements, and I Measures, as noted in the 2024–2025 Stronger Connections Grant Program Guidelines, and shall provide the Te Education Agency, upon request, any performance data necessary to assess the success of the grant program.	
	4. The applicant will formally establish a Student Support Program at three district campuses (one elementary, o intermediate/middle school, one high school) to address school climate and establish a student support team struational to the training and support provided by the Texas Center for Student Supports and the regional ESC. If the few than three campuses or does not have three of the listed types of campuses, the applicant will establish Support Program and the student support team structure at all campuses, up to three, served in the district.	ucture he applicant
	5. The applicant will allocate 6% of awarded funds for contracted services for technical assistance provided by th ESC. Complete the transaction with the regional ESC in a timely manner. Time is of the essence in completing the to ensure that the program is implemented efficiently and effectively to successfully achieve the goals of the prog	ne transaction
	6. The applicant will allocate 10% of awarded funds for professional and contracted services with a partner appro Texas Center for Student Support and TEA. Complete the transaction with the regional ESC in a timely manner. the essence in completing the transaction to ensure that the program is implemented efficiently and effectively to achieve the goals of the program.	Time is of
	7. The applicant will use the family engagement playbook developed by the Texas Center for Student Supports t build support with parents and families prior to a student support team assessment, and during the student supp implementation process to facilitate a student support partnership with families. 8. The applicant will establish a parent, student, and staff advisory committee to provide input on the establishme Student Support Program.	ort
	9.The applicant will engage in Student Support Program planning activities from the beginning of the grant progr implementation at the beginning of the 2024-2025 school year.	am through
	10. The applicant will establish and implement at the beginning of the 2024-2025 school year, the Student Suppo aligned to the content and training provided by the Texas Center for Student Supports.	ort Program
	11. The applicant will incorporate a case management system into the student support team structure aligned to and support provided by the Texas Center for Student Supports.	the training
	12. The applicant will align the student support team structure with behavioral threat assessment team operation outcomes to ensure that students are well supported and that the effectiveness of interventions are monitored.	and
	13. The applicant will implement the data collection and reporting system developed by the Texas Center for Stu Supports to gather and analyze data to monitor efficacy of the implementation of the Student Support Program, i student support team structure, quality of support leading to positive outcomes, and data related to increases in o outcomes (e.g. increase in student support team referrals for nonacademic needs, increase in effective supports students, reduction in disciplinary incidents, reduction in bullying and harassment, increase in referrals for menta services, reduction in removals from class, etc.).	ncluding desired received by
	14. The applicant will provide timely response to requests from TEA for information and data regarding program implementation, and performance and evaluation measures.	development,
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9. Statutory/	TEA Progra	am Requiremen	ts

1. Describe how the LEA will identify the campuses that will participate in the establishment of the Student Support Program described in the program description? Include the criteria or considerations that will influence the determination by the LEA.

2.Describe how the LEA will ensure that campus leaders and staff are committed to the success of the Student Support Program.

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9. 518	atutory/Program Re	equirements (C	ont.)

3. Describe how the LEA will engage parents and families to solicit support for the program.

4. Describe how the LEA will ensure that there is adequate staff to support the establishment and implementation of the Student Support Program.

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9. Statuto	vrv/Program Re	equirements (Cont.)	

5. Describe how each of the campuses will be supported by the grant program, if awarded, currently conduct behavioral threat assessments and how the campus will incorporate current systems into the student support team structure.

6. Describe how the LEA currently identifies student support n	eeds and how it identifies and establishes
partnerships with external mental health and behavioral health	n providers to meet student needs.

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9. Statutory/Program Requirements (Co	ont.)
•••	with the regional ESC to support improvement in student mental health, ealth and wellbeing, and improving academic outcomes for students.

8. Describe how the LEA will use this grant program to supplement current work to improve services and supports for the mental health, behavioral and emotional health, and physical health and wellness of students.

9. Enter the L	EA Total Enrollment:				
10. Enter the	Regional Educational	Service Cente	er that serves the LEA:		
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· · · · · · · · · · · · · · · · · · ·		nd Participatio			
groups that rec The appl services Barriers	eive service: icant assure: funded by th	s funded by this s that no barriers is grant. able access and	grant. s exist to	er any barriers exist to equitable access and participa equitable access and participation for any groups re ation for the following groups receiving services fund	eceiving
Group			Barrier		
Group			Barrier		
Group			Barrier		
Group			Barrier		
11. PNP Equ	itable Servi	ices			
Are any private	e nonprofit so	hools located wi	thin the	applicant's boundaries?	
⊖Yes	∩No				
page. Are any private O Yes	e nonprofit sc ⊖No	hools participati	ng in the	p here. You have completed the section. Proceed to grant? p here. You have completed the section. Proceed to	
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.					
Equitable Se					
1. LEA's stude	nt enrollmen	t			
2. Enrollment	2. Enrollment of all participating private schools				
3. Total enrollment of LEA and all participating PNPs (line 1 plus line 2)					
4. Total curren	4. Total current-year grant allocation				
5. LEA reserva	ation for direc	t administrative	costs, no	ot to exceed the grant's defined limit	
6. Total LEA a	mount for pro	ovision of ESSA	PNP eq	uitable services (line 4 minus line 5)	
7. Per-pupil LE	7. Per-pupil LEA amount for provision of ESSA PNP equitable services (line 6 divided by line 3)				
	LEA's tota	al required ESS	A PNP e	equitable services reservation (line 7 times line 2	

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# 12. Request for Grant Funds

List all of the allowable grant-related activities for which you are requesting grant funds. Include the amounts budgeted for each activity. Group similar activities and costs together under the appropriate heading. During negotiation, you will be required to budget your planned expenditures on a separate attachment provided by TEA.

## **Payroll Costs**

1.	
2.	
3.	
4.	
5.	

### **Professional and Contracted Services**

6. Required 6% of funds for technical assistance provided by the regional ESC			
7. Required 10% of funds to the Texas Center for Student Supports			
8.			
).			
0.			
Supplies and Materials			

11.	
12.	
13.	

## **Other Operating Costs**

15.	
16.	
17.	
Debt Services	
18.	
19.	

# **Capital Outlay**

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20.		
		Direct administrative costs:
		Indirect administrative costs:
	TOTAL	L GRANT AWARD REQUESTED:
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CDN	

Vendor ID

# Appendix I: Negotiation and Amendments

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 of the TEA website and may be mailed OR faxed (not both). **To fax:** one copy of all sections pertinent to the amendment (including budget attachments), along with a completed and signed page 1, to either (512) 463-9811 or (512) 463-9564. **To mail:** three copies of all sections pertinent to the amendment (including budget attachments), along with a completed and signed page 1, to either (source), along with a completed and signed page 1, to the address on page 1. More detailed amendment instructions can be found on the last page of the budget template.

## You may duplicate this page.

For amendments, choose the section you wish to amend from the drop down menu on the left. In the text box on the right, describe the changes you are making and the reason for them.

Always work with the most recent negotiated or amended application. If you are requesting a revised budget, please include the budget attachments with your amendment.

Section Being Negotiated or Amended	Negotiated Change or Amendment	
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