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| **Summer Learning and Afterschool Opportunities Grant Proposal** **Narrative Submission Form** |
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| **A. APPLICANT BASIC INFORMATION** |
| 1. **Applicant Name**
 | Click or tap here to enter text. |
| 1. **Applicant Type**
 | Choose an item. |
| 1. **Applicant Information Retrieval Number (IRN)**
 | Click or tap here to enter text. |
| 1. **Applicant Street Address**
 | Click or tap here to enter text. |
| **City** | Click or tap here to enter text. |
| **State** | Click or tap here to enter text. |
| **Zip Code** | Click or tap here to enter text. |
| 1. **Applicant Contact Name**
 | Click or tap here to enter text. |
| **Title** | Click or tap here to enter text. |
| **Organization** | Click or tap here to enter text. |
| **Phone Number** | Click or tap here to enter text. |
| **Email** | Click or tap here to enter text. |
| **6. What community school, public school or district do your program participants attend? List all that apply.** |
| Click or tap here to enter text. |

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| **B. APPLICANT SITE INFORMATION**For each program site being proposed, provide the following information: |
| **7. Program Site Name** (where students are served)  | Click or tap here to enter text. |
| **8. Program Site IRN** | Click or tap here to enter text. | **9: ODE or ODJFS** **License Number, if applicable** | Click or tap here to enter text. |
| **10. Program Site Street Address** | Click or tap here to enter text. |
| **City** | Click or tap here to enter text. |
| **State** | Click or tap here to enter text. |
| **Zip Code** | Click or tap here to enter text. |

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| **C. APPLICANT AWARD TYPE** |
| **11. Which Award Type are you applying for?****Select one.** | [ ] Afterschool Create |
|  | [ ] Afterschool Expand |
|  | [ ] Summer Create |
|  | [ ] Summer Expand |
| **12. How much money are you applying for in this award type?** *See up to amounts provided earlier in this document. A budget will be submitted as part of this application. (see Question 28 below).* |
| Click or tap here to enter text. |
| **D. APPLICANT PROGRAM INFORMATION** |
| **13.** **Approximate start date of the grant-funded programming,** **if awarded.** | Click or tap to enter a date. |
| **14. Approximate end date of the grant-funded programming,** **if awarded.** *Please note, if applying for a summer grant, provide an approximate end date for summer programming each year (2022, 2023, and 2024). If applying for an afterschool grant, provide an approximate end date for school year programming each year (2023 and 2024).* | Click or tap to enter a date. |
| **15. Age range and number of students the program will serve. Describe local needs that will determine students the program will serve. Describe how the program will promote enrollment among vulnerable populations (including, but not limited to students in foster case, experiencing homelessness, military-connected, English learners, and in transition from court involvement).** |
| Click or tap here to enter text. |
| **16. Operational hours of the program (be specific as to when students will arrive and leave which days of the week during the scheduled program) that includes academic enrichment and other proposed activities that will be a part of the evidence-based programming.** |
| Click or tap here to enter text. |
| **17. Describe the structure of the programming, including where the students will be served, the days of the week and timeframe of operation. Stated another way, how will the program run?** |
| Click or tap here to enter text. |
| **18. Describe the programming plan, including curriculum, assessment, and activities. How will the program ensure interventions and social emotional supports are in place so students most in need can participate fully and regularly?** |
| Click or tap here to enter text. |
| **19. Describe what the intended or anticipated outcomes of participating in the program include. These can include academic, social and emotional, physical/health, and/or preparation, experience, or exposure to new opportunities provided directly by the proposed programming and/or the areas in partnership with an LEA that will be provided** |
| Click or tap here to enter text. |
| **20. Which level of evidence does the planned programming meet? Select from:**  |
|[ ]  **Strong Evidence:**there is at least one well-designed and well-implemented experimental study (e.g., a randomized control trial) on the intervention. This is sometimes referred to as “Tier 1” evidence.   |
|[ ]  **Moderate Evidence:** there is at least one well-designed and well-implemented quasi-experimental study on the intervention. This is sometimes referred to as “Tier 2” evidence.   |
|[ ]  **Promising Evidence:**there is at least one well-designed and well-implemented correlational study with statistical controls for selection bias on the intervention. This is sometimes referred to as “Tier 3” evidence.  |
|[ ]  **Demonstrates Rationale**: the intervention includes: 1) a well-specified logic model that is informed by research or an evaluation that suggests how the intervention is likely to improve relevant outcomes; and 2) an effort to study the effects of the intervention. This is sometimes referred to as “Tier 4” evidence. |

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| **E. Applicant Capacity, Experience & Readiness** |
| **21. Describe your experience in providing academic and enrichment services in afterschool and/or summer programming.  How many years of experience?** |
| Click or tap here to enter text. |
| **22. Describe the need for this type of programming for the location and population it is proposed for. Include data from census, community, school, organization, or other assessment sources. Is the programming serving students from the focus list?** |
| Click or tap here to enter text. |
| **23. Describe the relationship between the Applicant and the Partnering Organization, including the planning meetings which have taken place and the extent to which a written Memorandum of Understanding, contract, or agreement has been drafted or is in place.** |
| Click or tap here to enter text. |
| **24. Describe the extent to which the program, if already in existence (Required for Expand grants, Not Required for Create grants), has provided for meeting needs in the location/community and/or population it serves. Provide any positive outcome data that is available on the impact for participants in the programming.** |
| Click or tap here to enter text. |
| **25. Describe the capacity of the Applicant to staff the program with existing personnel and/or the plan for hiring, including the credentials or other minimum qualifications of those being utilized or hired by position.** |
| Click or tap here to enter text. |
| **26. Describe how the grant activities will be monitored for meeting program requirements.** |
| Click or tap here to enter text. |
| **27. Describe how the grant will be monitored for meeting fiscal responsibilities, including expending funds only for allowable expenses, submitting budget revisions into the Department CCIP system, uploading Project Cash Requests for reimbursement on a quarterly basis and completing an annual Final Expenditure Report (FER).** |
| Click or tap here to enter text. |
| **28. Describe each section of the grant’s proposed budget, including the annual amount expected to spend for each of the spending categories: The budget is divided into object and purpose codes.** [**Budgeting Guidance**](https://education.ohio.gov/getattachment/Topics/Finance-and-Funding/Grants-Administration/Sections/Grants-Manual/Budgeting-Expenses-and-Required-Support-Documentation.pdf.aspx?lang=en-US)**is provided by the Department and should be followed both before and after award. You must provide a detailed summary of the anticipated expenditures to determine allowable costs.** |
| Click or tap here to enter text. |
| **29. Describe the extent to which proposed programming meets any of the funding priorities.** |
| Click or tap here to enter text. |