

**APPLICATION FOR PARTICIPATION**

Maryland State Department of Education
200 West Baltimore Street
Baltimore, Maryland 21201

Deadline
July 14, 2023
No later than 5:00 p.m. EDT

Next Generation Scholars of Maryland

**MARYLAND STATE DEPARTMENT OF EDUCATION**

**Mohammed Choudhury**State Superintendent of Schools
Secretary-Treasurer, Maryland State Board of Education

**Deann Collins, Ed.D.**Deputy Superintendent of Teaching and Learning

**Wes Moore**Governor

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Holly C. Wilcox, Ph.D.

Merin Thomas (Student Member)

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# Instructions

1. Complete this application electronically by typing directly into the fillable fields and charts.
2. Do not alter or remove sections.
3. When finished, save the application document as a pdf to your computer and obtain appropriate signatures.
4. The completed application and all required attachments should be saved as a pdf and emailed to susan.spinnato@maryland.gov
5. The Next Generation Scholars of Maryland Grant Application is due by 5:00 p.m. on July 14, 2023.

# Proposal Cover Page

Program Title:

Project/Program Director:

Director Phone:

Director email:

Lead Agency Name:

Lead Agency Address:

Lead Agency’s UEI Number:

Lead Agency’s Employer/Taxpayer Identification Number (EIN/TIN):

Type of Organization (non-profit agency, college, or university):

List the schools that will be served by the proposed program:

| **Local Education Agency** | **School Name** | **Service Locations: School and Community Site** | **Proposed Number of Students Served** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*\*Add more rows, if necessary*

List the partners who will provide services in partnership with the grantee:

| **Local Education Agency** | **School Name** | **Service Locations: School and Community Site** | **Proposed Number of Students Served** |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*\*Add more rows, if necessary*

Times of operation:

* School year:

☐ After school

☐ Before school

☐ Weekends

* + Day(s) of the week

☐ Monday

☐ Tuesday

☐ Wednesday

☐ Thursday

☐ Friday

☐ Saturday

☐ Sunday

* Summer:
* Day(s) of the week

☐ Monday

☐ Tuesday

☐ Wednesday

☐ Thursday

☐ Friday

☐ Saturday

☐ Sunday

List the locations where the program will operate. For each site, indicate whether it is a school building or a community location:

| **Site/School Name** | **City** | **Zip Code** |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |

*\*Add more rows, if necessary*

Per Student Expenditures: $

* Total funding requested: $
* Total number of students to be served: $
* Cost per student: $

(Should agree with Proposed Budget)

Printed Name of Head of Applicant Agency Date

Signature of Head of Applicant Agency Date

# Project Narrative

## PROJECT ABSTRACT (250 WORDS)

Summarize the project for the reader. Refer to the Grant Information Guide for further guidance.

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| --- |
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## EXTENT OF NEED - (20 POINTS)

Identify a clearly defined problem and discuss the impact of the proposed program.

|  |
| --- |
|  |

## Evidence of Impact (15 points)

Describe how the proposed plan and strategies are evidence-based and will lead to the desired impact. Please include a description of the organization’s experience in terms of effective practices (research-based strategies) leading to desired outcomes. Identify a clearly defined problem and discuss the impact of the proposed program.

|  |
| --- |
|  |

## GOALS, MEASURABLE outcomes, and milestones - (20 POINTS)

Communicate the goals and measurable objectives of the program. Applicants must include at least one goal for each of the required components of the Next Generation Scholars Program: financial aid literacy assistance, career and interest assessments, mentorship and one-on-one counseling, visits to college campuses and workplaces, an intensive summer bridge program for students entering an institution of higher education directly from high school, a plan for outreach and registration of new students, and a plan to matriculate and graduate from an institution of higher education. Refer to the Grant Information Guide for further guidance on this section.

|  |
| --- |
| **High School Graduation Plan Goal:** |
| **Measurable Objective(s):** |

*\*Add more rows if necessary*

## Plan of Operation, key personnel and timeline - (20 Points)

The Plan of Operation includes the strategies, activities, and timeline that will be implemented to achieve your goals. For each goal listed above, provide the activities, timeline, and data collected.

| **Goal** | **Strategy/Activities** | **Timeline** | **Data Collected** |
| --- | --- | --- | --- |
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|  |  |  |  |
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*\*Add more rows if necessary*

### Key Personnel

The management plan clearly defines the roles, responsibilities, tasks, and deadlines of key contributors to make sure your program is a success. Ensure that all administrative and key personnel responsible for the successful implementation and monitoring of the grant requirements are captured here.

| **Action** | **Title/Partner Organization Responsible** | **Dates**  |
| --- | --- | --- |
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|  |  |  |
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|  |  |  |

*\*Add more rows if necessary*

**Timeline**

Applicants must provide a timeline for the year of operation. See a sample timeline approach below:

| **Proposed Activities** | **Date of Implementation** | **Name of Responsible Person & Title** |
| --- | --- | --- |
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|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| *\*Add more rows if necessary.* |

## evaluation - (15 Points)

Provide performance measures for each project goal.

| **Goal** | **Performance Measure(s)** |
| --- | --- |
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|  |  |
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|  |  |
|  |  |

*\*Add more rows if necessary*

##

## BUDGET AND BUDGET NARRATIVE - (10 POINTS)

Please provide a detailed description of the requested funds that will be spent by using the categories listed below. Add more rows if needed. An MSDE [Grant Budget C-125](https://www.marylandpublicschools.org/about/Documents/Grants/GrantForms-12-10-2020.xls) form must also be completed, signed, and submitted as an appendix.

**1. Salaries & Wages (list each position separately)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | Total for salaries & wages: |  |  |  |

Using the space below, explain how the costs for salaries & wages above are necessary, reasonable, and cost-effective.

|  |
| --- |
| Type response here. |

**2. Contracted Services**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | Total for contracted services: |  |  |  |

Using the space below, explain how the costs for contracted services above are necessary, reasonable, and cost-effective.

|  |
| --- |
| Type response here. |

**3. Supplies & materials**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
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|  | Total supplies & materials: |  |  |  |

Using the space below, explain how the costs for supplies & materials above are necessary, reasonable, and cost-effective.

|  |
| --- |
| Type response here. |

**4. Other charges**

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| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
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|  |  |  |  |  |
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|  | Total for other charges: |  |  |  |

Using the space below, explain how the costs for other charges above are necessary, reasonable, and cost-effective.

|  |
| --- |
| Type response here. |

**5. Equipment**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
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|  |  |  |  |  |
|  | Total for equipment: |  |  |  |

Using the space below, explain how the costs for equipment above are necessary, reasonable, and cost-effective.

|  |
| --- |
| Type response here. |

**6. Transfers (indirect costs)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  | Total for transfers: |  |  |  |

Using the space below, explain how the costs for transfers (indirect costs) above are necessary, reasonable, and cost-effective.

|  |
| --- |
| Type response here. |

|  |
| --- |
| Total amount requested:  |

# Appendices

The following Appendices must be included in the proposal for funding, but do not apply to the page limit of the Project Narrative:

Appendix A: Resumes of key personnel.

Appendix B: Evidence of status of a [non-profit 501(c)(3) organization](https://www.irs.gov/charities-non-profits/charitable-organizations/exemption-requirements-501c3-organizations)

Appendix C: [C-1-25 MSDE budget form](https://www.marylandpublicschools.org/about/Pages/OFPOS/GAC/Forms.aspx)

Appendix D: A [signed recipient assurances page](https://www.marylandpublicschools.org/about/Documents/Grants/GrantRecipientAssurances.pdf)