

Application for Participation

Arts Education in Maryland Schools Fine Arts Initiative FY 2026

Maryland State Department of Education

200 West Baltimore Street Baltimore, Maryland 21201

Deadline June 30, 2025 No later than 5:00 p.m. EDT

MARYLAND STATE DEPARTMENT OF EDUCATION

Carey M. Wright, Ed.D. State Superintendent of Schools

Tenette Smith, Ed.D.

Deputy State Superintendent Office of Teaching and Learning

Wes Moore

Governor

MARYLAND STATE BOARD OF EDUCATION

Joshua L. Michael, Ph.D.

President, Maryland State Board of Education

Monica Goldson, Ed.D. (Vice President)

Chuen-Chin Bianca Chang, MSN, PNP, RN-BC

Susan J. Getty, Ed.D.

Nick Greer

Dr. Irma E. Johnson

Dr. Joan Mele-McCarthy, D.A., CCC-SLP

Rachel L. McCusker

Samir Paul, Esq.

Clarence C. Crawford (President Emeritus)

Abhiram Gaddam (Student Member)

Table of Contents

Instructions
Proposal Cover Page
Project Proposal5
Budget and Budget Narrative7
Appendices7

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 signed and completed application should be saved as a single pdf document and emailed as an attachment to <u>elizabeth.devereux@maryland.gov</u> with the subject "Arts Education in Maryland Schools Fine Arts Initiative FY 2026 Grant Application Submission".

Proposal Cover Page

Project Title:

Name of Contact Person:

Contact Person Phone:

Contact Person Email:

Institution/Agency Name:

Institution/Agency Address:

Financial Contact Name:

Financial Contact Email:

Amount of the request for grant period (July 1, 2025 – June 30, 2026): \$237,458

(Should agree with Proposed Budget)

Agency Head (Printed Name and Title)

Signature of Agency Head

Date

Date

Project Proposal

Project Proposal Refer to the Project Proposal section of the Grant Information Guide for further detail. Project Description: Narrative and Purpose: Goals and Measurable Outcomes:

	Activity Plan and Timeline*						
Activity	Person/People Responsible	Milestone Dates/ Interim Deadlines (Month, Range, Division of Costs if Ongoing Activity)	Date of Completion/ Deadline (Month, Range, Ongoing)	Additional Notes (if applicable)			

*Please add additional rows for each grant activity, as necessary.

Project Proposal - continued

Refer to the Project Proposal section of the Grant Information Guide for further detail.

Evaluation and Dissemination:

Signature				
Agency Head (Printed Name and Title)	Signature of Agency Head			

Budget and Budget Narrative

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 <u>Grant Budget C-1-25</u> form must also be completed, signed, and submitted as an appendix.

1. SALARIES AND WAGES (LIST)

Line Item	Calculation	Requested	In-Kind	Total
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
	Total for Salaries and Wages:	\$	\$	\$

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

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

2. CONTRACTED SERVICES

Line Item	Calculation	Requested	In-Kind	Total
		\$	\$	\$
		\$	\$	\$

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 AND MATERIALS

Line Item	Calculation	Requested	In-Kind	Total
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
	Total for Supplies and Materials:	\$	\$	\$

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

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

4. OTHER CHARGES

Line Item	Calculation	Requested	In-Kind	Total
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$

Line Item	Calculation	Requested	In-Kind	Total
	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
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
	Total for Equipment:	\$	\$	\$

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

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 above are necessary, reasonable, and costeffective. Type response here.

Total amount requested: \$

Appendices

The following appendices must be included. Include other appendices as deemed necessary.

- Appendix A: <u>A signed recipient assurances page</u>
- Appendix B: <u>A signed C-1-25 MSDE budget form</u>
- Appendix C: Taxpayer identification number and certification (<u>W-9 Form</u>)