MARYLAND STATE DEPARTMENT OF EDUCATION

EQUITY AND EXCELLENCE

APPLICATION

FY23 Learning in Extended Academic Programs

MARYLAND STATE DEPARTMENT OF EDUCATION

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Submission Instructions

Complete this application electronically by typing directly into the fillable fields and charts. Do not alter or remove sections. When finished, save the application document as a pdf to your computer and obtain appropriate signatures.

Required application components for the FY 23 Learning in Extended Academic Programs (LEAP) include completion of the:

1. Grant Application Form (Microsoft Word document, saved to pdf); and
2. Required Attachments (a signed C-1-25, Budget Worksheet and Narrative).

Email to the application and required attachments to the attention of Mr. Reginald Burke, Youth Development Branch Director at themsde.ostteam@maryland.gov.

The FY 23 Learning in Extended Academic Programs grant application is due by 5:00 p.m. on January 16, 2023,

FY 23 LEAP Grant Cover Page

Local Education Agency: Click or tap here to enter text.

Fiscal Year: Click or tap here to enter text.

Amount of request for grant period (July 1, 2022 – June 30, 2023): $ Click or tap here to enter text.

Federal Employer ID Number: Click or tap here to enter text.

UEI number: Click or tap here to enter text..   Expiration date: Click or tap here to enter text.

Grant Manager Name: Click or tap here to enter text.	**Title:** Click or tap here to enter text.
Email: Click or tap here to enter text.	**Phone:** Click or tap here to enter text.
Financial Contact Name: Click or tap here to enter text.	**Title:** Click or tap here to enter text.
Email: Click or tap here to enter text.	**Phone:** Click or tap here to enter text.

List of Proposed Eligible Schools:

Name of School	Free and Reduced Meals Percentage for School Year 2021-2022
Click or tap here to enter text.	Click or tap here to enter text. %
Click or tap here to enter text.	Click or tap here to enter text. %
Click or tap here to enter text.	Click or tap here to enter text. %
Click or tap here to enter text.	Click or tap here to enter text. %
Click or tap here to enter text.	Click or tap here to enter text. %

Add more rows if necessary

Click or tap here to enter text.
Superintendent: Printed name

Click or tap here to enter text.
Date

_____
Superintendent: Signature

Click or tap here to enter text.
Date

Project Narrative (10-page limit)

- **Extent of Need**

Describe the conditions or needs to be addressed through the FY23 LEAP grant program. Include a clearly defined problem supported by a needs assessment and supporting data. Describe how the grant funds will address the problem and show how those efforts are effective.

Click or tap here to enter text.

- **Performance Measures and Indicators**

The applicant must identify a minimum of three of the State Education Agency performance goals (refer to the Grant Information Guide, page 5). The goals should address the main problem identified in the needs assessment. The applicant should identify a target percentage and identify objectives or anticipated outcomes to be accomplished.

Goal #1: Click or tap here to enter text.
Target Percentage:Click or tap here to enter text.
Strategies and Activities: Click or tap here to enter text.
Measurable Outcome: Click or tap here to enter text.

Add more rows if necessary

Goal #2: Click or tap here to enter text.
Target Percentage: Click or tap here to enter text.
Strategies and Activities: Click or tap here to enter text.
Measurable Outcome: Click or tap here to enter text.

Add more rows if necessary

Goal #3: Click or tap here to enter text.
Target Percentage: Click or tap here to enter text.
Strategies and Activities: Click or tap here to enter text.

Measurable Outcome: Click or tap here to enter text.

Add more rows if necessary

Goal #4: Click or tap here to enter text.
Target Percentage: Click or tap here to enter text.
Strategies and Activities: Click or tap here to enter text.
Measurable Outcome: Click or tap here to enter text.

Add more rows if necessary

Goal #5: Click or tap here to enter text.
Target Percentage: Click or tap here to enter text.
Strategies and Activities: Click or tap here to enter text.
Measurable Outcome: Click or tap here to enter text.

- **Plan of Operation, Key Personnel and Timeline**

Describe the strategies and activities, key personnel actions and timeline being implemented to reach the grant outcomes.

Click or tap here to enter text.

Identify key personnel responsible for the operations supported by this funding including names, titles, roles, and responsibilities relative to plan implementation.

Name	Title	Roles & Responsibilities
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.

Add more rows if necessary

- **Evidence of Impact**

Describe how the proposed plan and strategies being implemented are evidence-based and will lead to the desired impact.

Click here to enter text.

- **Evaluation and Dissemination Plan**

Grantees are required to submit annual evaluation report at the end of the grant program. The evaluation plan must include evaluation questions, strategy, and a description of proposed data instruments, collection processes, and analytic methods that are consistent with the project's goal and objectives.

Click here to enter text.

- **Partners Plan (If applicable)**

Grantees are required to identify project's partners, their respective roles in the project, the benefits each expects to receive, and the specific contributions each partner will make to the project in the form of financial support, equipment, personnel, or other resources. Also include which objectives their services will help to achieve. If awarded, the LEA must upload signed subcontractor contracts/Memorandum of Understanding (MOU) for review and approval before funds will be released for reimbursement; any funds paid to subcontractors without an approved contract in place are subject to nonpayment.

Partner	Roles and Responsibilities	Benefit to the Project
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.

Add more rows if necessary

Grant Budget

Please provide a description of the requested funds by completing the Budget Worksheet and Narrative. Add more rows if needed. An MSDE Grant Budget Form C-125 form must also be completed, signed and submitted as an appendix.

Assurances

Notice of Grant Awards (NOGAs) to LEAs will include a Recipient Assurance page, which must be signed by the LEA Superintendent, agreeing to comply with the terms and conditions of the grant award. The Assurance page must be returned to MSDE within two weeks of receipt of the NOGA.

General Education Provisions Act (GEPA), Section 427

Explain the steps the applicant will take to ensure equitable access to and participation in the project as it is related to the six (6) types of barriers described in the GEPA (gender, race, national origin, color, disability, and age).

Click here to enter text.

Attachments

- A signed MSDE Grant Budget Form C-1-25