



Application for Participation

Maryland National Board Certification Support Grant

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

Deadline

June 9, 2025

No later than 5:00 p.m. EDT

MARYLAND STATE DEPARTMENT OF EDUCATION

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

Geoffrey Sanderson
Deputy State Superintendent
Office of Accountability

Kelly Meadows
Assistant State Superintendent
Division of Educator Effectiveness

Wes Moore
Governor

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Clarence C. Crawford (President Emeritus)

Abhiram Gaddam (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 signed and completed application should be saved as a single pdf document and emailed as an attachment to Melissa.Chandler@maryland.gov with the subject “NBC Support Grant Application Submission”.

Proposal Cover Page

Institution/Agency/Jurisdiction Name:

Name of Contact Person:

Institution/Agency Address:

Contact Person Phone:

Contact Person Email:

Project Partners:

Agency/Organization Name	Primary Contact	Partner's Project Role

**Add more rows as needed.*

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

\$

(Should agree with Proposed Budget and the C-1-25.)

Signature of Contact Person

Date

Printed Name of Contact Person

Title

Signature of Superintendent of Schools

Date

Printed Name of Superintendent

LEA Name

Project Narrative

Please refer to the Grant Information Guide (GIG) for information on completing each section.

PROJECT DESCRIPTION (ONE PAGE OR LESS)

In the Project Description, introduce the project to the reader. The description should be factual, brief, and focused on the organization's efforts. Do not assume the reader is familiar with the proposed project. The project description should cover the core aspects of the proposed project, such as the populations served, a brief description of the goals, the strategies to meet them, and the roles of the partners.

Enter text here.

EXTENT OF NEED

Refer to the grant information guide for additional guidance.

Enter text here.

GOALS, MEASURABLE OUTCOMES AND MILESTONES

Refer to the grant information guide for additional guidance.

Goal 1:

Outcome(s):

Milestone(s):

Goal 2:

Outcome(s):

Milestone(s):

Goal 3:

Outcome(s):

Milestone(s):

**Add more tables if including additional goals.*

STRATEGIES

What strategies will be used to reach project milestones, accomplish outcomes, and achieve project goals? Discuss how and why these strategies were chosen. Describe plans for sustainability beyond the funding cycle. Refer to the grant information guide for additional guidance.

Enter text here.

Who are the targeted populations to be impacted by the strategies chosen? And how will they be impacted? Refer to the grant information guide for additional guidance.

Enter text here.

PLAN OF OPERATION, KEY PERSONNEL, AND TIMELINE

Refer to the grant information guide for additional guidance.

Key Activities	Individual Responsible	Time Frame

Key Activities	Individual Responsible	Time Frame

EVALUATION AND EVIDENCE OF IMPACT

Grantees are required to submit an interim progress report that is consistent with the project's goal and objective(s). Keep in mind that the final evaluation summary will consider the entire project, beginning to end it should not be viewed as what is done after the project's completion, but as an integral element in the project's planning, design, and implementation. An effective ongoing plan that evaluates milestones quarterly helps project staff to make informed decisions about needed changes. Refer to the grant information guide for additional guidance.

Enter text here.

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. When completing this section, refer to Use of Funds and Budget and Budget Narrative sections in the Grant Information Guide. A C-1-25 Budget Form must also be submitted.

SALARIES AND WAGES (LIST SEPARATELY FOR EACH POSITION)

Line item	Calculation	Requested	In-Kind	Total
TOTAL FOR SALARIES & WAGES:				

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

Enter text here.

CONTRACTED SERVICES

Line item	Calculation	Requested	In-Kind	Total
TOTAL FOR CONTRACTED SERVICES:				

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

Enter text here.

SUPPLIES & MATERIALS

Line item	Calculation	Requested	In-Kind	Total
TOTAL FOR SUPPLIES & MATERIALS:				

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

Enter text here.

OTHER CHARGES

Line item	Calculation	Requested	In-Kind	Total
TOTAL FOR OTHER CHARGES:				

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

Enter text here.

EQUIPMENT

Line item	Calculation	Requested	In-Kind	Total
TOTAL FOR EQUIPMENT:				

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

Enter text here.

TRANSFERS

Line item	Calculation	Requested	In-Kind	Total
TOTAL FOR TRANSFERS:				

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

Enter text here.

Appendices

The following appendices must be included but not apply to the page limit of the Project Narrative. Include other appendices as deemed necessary.

Appendix A: [A signed recipient assurances page](#)

Appendix B: [A signed C-1-25 MSDE budget form](#)