

APPLICATION FOR PARTICIPATION

Career and Technical Education (CTE) FY23 State Institutions Grant

Maryland State Department of Education

200 West Baltimore Street Baltimore, Maryland 21201

Deadline

October 26, 2022 No later than 5:00 p.m. EST

MARYLAND STATE DEPARTMENT OF EDUCATION

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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. The completed Application should be saved as a pdf an emailed to:

> Traci Verzi, Coordinator of Finance and Legislation for Career Programs Division of Career and College Readiness Maryland State Department of Education Phone: 410-767-0165

> > Email: Traci.Verzi@maryland.gov.

Proposal Cover Page

to enter text.	
oject's outcome(s	s) and strategies.
	ere to enter amount. \$ enter amount.
State/Local	\$ enter amount.
Other	\$ enter amount.
	1
	oject's outcome(s , 2023): \$ Click h Federal State/Local

PROJECT ABSTRACT - 1 PAGE

Summarize the project for the reader. Please refer to the Grant Information Guide page 7 for instructions.

Type response here.

Project Narrative

The project narrative sections, along with the budget will be scored by reviewers. See the rubric on page 12 for the points assigned to each section.

EXTENT OF NEED

Describe the extent of need for the federal funds.

Click or tap here to enter text.

Include a brief description of the organization's mission, vision, and goals as they relate to the project.

Click or tap here to enter text.

A description of the planned activities may include new programming, professional learning for CTE instructors, purchasing of equipment and/or materials of instruction; support for students to earn industry credentials.

Click or tap here to enter text.

GOALS, MEASURABLE OUTCOMES AND MILESTONES

20 POINTS

State the overall goal(s) of the project and related outcomes and milestones. Refer to the Grant Information Guide for further instructions on this section.

Goals, Measurable Outcomes, and Milestones:

Goal #1: By Click or tap to enter a date., Click or tap here to enter text.

Outcomes: Click or tap here to enter text.

Milestone: Click or tap here to enter text.

*Add more rows if necessary

Goal #2: By Click or tap to enter a date., Click or tap here to enter text.

Outcomes: Click or tap here to enter text.

Milestone: Click or tap here to enter text.

*Add more rows if necessary

Goal #3: By Click or tap to enter a date., Click or tap here to enter text.

Outcomes: Click or tap here to enter text.

Milestone: Click or tap here to enter text.

PLAN OF OPERATION, KEY PERSONNEL, AND PROJECT TIMELINE

The Plan of Operation includes the strategies, activities, and timeline that will be implemented to achieve your goals, outcomes, and milestones. Use the table to address the following that apply to the project.

Timeline	Strategy/Activities	Person Responsible	Partner Organization
Click here to enter time	Click here to enter title.	Click here to enter name and title.	Click here to enter organization.
Click here to enter time	Click here to enter title.	Click here to enter name and title.	Click here to enter organization.
Click here to enter time	Click here to enter title.	Click here to enter name and title.	Click here to enter organization.
Click here to enter time	Click here to enter title.	Click here to enter name and title.	Click here to enter organization.

^{*}Add more rows if necessary

EVALUATION AND DISSEMINATION

Describe how the organization will operationalize an evaluation plan to ensure that the proposed program supports overall goals of the grant. Include the evaluation methods that will be used to determine the overall success of the project.

Click or tap here to enter text.

^{*}Add more rows if necessary

Describe the project monitoring processes, including measurable improvements expected to occur once the program/activity has been fully implemented. What data will be reviewed to indicate that the program/activity has had the intended effects?

Click or tap here to enter text.

Budget and Budget Narrative

In the following table, provide a detailed description of the requested funds that will be spent by using the list of allowable expenditures. Add more rows if needed. An MSDE Grant Budget C-1-25 form (for secondary applicants) form must also be completed, signed and submitted as an Attachment.

Please review the GIG for a list of allowable expenditures (A-I).

Allowable Expenses (A-I)	Unit Cost	Quantity	Total

Provide a description of each budget category in the spaces below. For example, under Salaries and Wages, describe the number of staff attending trainings. If funds are used to hire substitute staff, include amounts. Include FICA/Benefits if applicable.

		Wages

Click or tap here to enter text.

2. Contracted Services

Click or tap here to enter text.

3. Supplies and Materials

Click or tap here to enter text.

4. Other Charges

Click or tap here to enter text.

5. Equipment

Click or tap here to enter text.

Required Attachments

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

- A signed secondary (C-1-25 MSDE budget form) or Postsecondary/Other Budget form
- A signed recipient assurances page
- Grant Information Survey Form
- Lobbying and Debarment Forms (If the LEA or CC already submitted these as part of their Perkins Application, then there is no need to submit again)