

**Texas Education Agency
Standard Application System (SAS)**

2018–2019 Texas Education for Homeless Children and Youth		
Program authority:	McKinney-Vento Homeless Assistance Act, Subtitle VII-B, reauthorized by Title IX, Part A, of the Every Student Succeeds Act	FOR TEA USE ONLY Write NOGA ID here.
Grant Period:	September 1, 2018, to August 31, 2019	
Application deadline:	5:00 p.m. Central Time, April 3, 2018	Place date stamp here.
Submittal information:	<p>Applicants must submit one original copy of the application with an original signature, and two copies of the application, printed on one side only and signed by a person authorized to bind the applicant to a contractual agreement, must be received no later than the aforementioned date and time at this address:</p> <p style="text-align: center;">Document Control Center, Grants Administration Division Texas Education Agency, 1701 North Congress Ave. Austin, TX 78701-1494</p>	
Contact information:	Cal Lopez; HomelessEducation@tea.texas.gov , (512) 463-9414	


Schedule #1—General Information

Part 1: Applicant Information				
Organization name	County-District #		Amendment #	
Hitchcock ISD	084908			
Vendor ID #	ESC Region #	DUNS #		
1746001099	4	944313220		
Mailing address		City	State	ZIP Code
7801 Neville Ave. Bldg. B		Hitchcock	TX	77563
Primary Contact				
First name	M.I.	Last name	Title	
Jennifer		Donovan	Finance Director	
Telephone #	Email address		FAX #	
409-316-6545	jdonovan@hitchcockisd.org		409-986-5141	
Secondary Contact				
First name	M.I.	Last name	Title	
Kay		Painter	Grant Specialist	
Telephone #	Email address		FAX #	
409-316-6545	kpainter@hitchcockisd.org		409-986-5141	
Part 2: Certification and Incorporation				

I hereby certify that the information contained in this application is, to the best of my knowledge, correct and that the organization named above has authorized me as its representative to obligate this organization in a legally binding contractual agreement. I further certify that any ensuing program and activity will be conducted in accordance with all applicable federal and state laws and regulations, application guidelines and instructions, the general provisions and assurances, debarment and suspension certification, lobbying certification requirements, special provisions and assurances, and the schedules attached as applicable. It is understood by the applicant that this application constitutes an offer and, if accepted by the Agency or renegotiated to acceptance, will form a binding agreement.

Authorized Official:

First name	M.I.	Last name	Title
Carla		Vickroy	Superintendent
Telephone #		Email address	FAX #
409-316-6545		cvickroy@hitchcockisd.org	409-986-5141
Signature (blue ink preferred)		Date signed	


Only the legally responsible party may sign this application.

3-29-18

701-18-109-059

Schedule #1—General Information

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Part 3: Schedules Required for New or Amended Applications

An X in the "New" column indicates a required schedule that must be submitted as part of any new application. The applicant must mark the "New" checkbox for each additional schedule submitted to complete the application.

For amended applications, the applicant must mark the "Amended" checkbox for each schedule being submitted as part of the amendment.

Schedule #	Schedule Name	Application Type	
		New	Amended
1	General Information	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2	Required Attachments and Provisions and Assurances	<input checked="" type="checkbox"/>	N/A
3	Certification of Shared Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4	Request for Amendment	N/A	<input checked="" type="checkbox"/>
5	Program Executive Summary	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6	Program Budget Summary	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7	Payroll Costs (6100)	See Important Note For Competitive Grants*	<input type="checkbox"/>
8	Professional and Contracted Services (6200)		<input type="checkbox"/>
9	Supplies and Materials (6300)		<input type="checkbox"/>
10	Other Operating Costs (6400)		<input type="checkbox"/>
11	Capital Outlay (6600)		<input type="checkbox"/>
12	Demographics and Participants to Be Served with Grant Funds	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13	Needs Assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14	Management Plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15	Project Evaluation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16	Responses to Statutory Requirements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17	Responses to TEA Requirements	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18	Equitable Access and Participation	<input checked="" type="checkbox"/>	<input type="checkbox"/>

***IMPORTANT NOTE FOR COMPETITIVE GRANTS:** Schedules #7, #8, #9, #10 and #11 are required schedules if any dollar amount is entered for the corresponding class/object code on Schedule #6—Program Budget Summary. For example, if any dollar amount is budgeted for class/object code 6100 on Schedule #6—Program Budget Summary, then Schedule #7—Payroll Costs (6100) is required. If it is either blank or missing from the application, **the application will be disqualified.**

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Changes on this page have been confirmed with:

On this date:

Via telephone/fax/email (circle as appropriate)

By TEA staff person:

Schedule #2—Required Attachments and Provisions and Assurances

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Part 1: Required Attachments

The following table lists the fiscal-related and program-related documents that are required to be submitted with the application (attached to the back of each copy, as an appendix).

#	Applicant Type	Name of Required Fiscal-Related Attachment
No fiscal-related attachments are required for this grant.		
#	Name of Required Program-Related Attachment	Description of Required Program-Related Attachment
No program-related attachments are required for this grant.		

Part 2: Acceptance and Compliance

By marking an X in each of the boxes below, the authorized official who signs Schedule #1—General Information certifies his or her acceptance of and compliance with all of the following guidelines, provisions, and assurances.

Note that provisions and assurances specific to this program are listed separately, in Part 3 of this schedule, and require a separate certification.

X	Acceptance and Compliance
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with the <u>General and Fiscal Guidelines</u> .
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with the <u>program guidelines</u> for this grant.
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with all <u>General Provisions and Assurances</u> requirements.
<input checked="" type="checkbox"/>	I certify that I am not debarred or suspended. I also certify my acceptance of and compliance with all <u>Debarment and Suspension Certification</u> requirements.
<input checked="" type="checkbox"/>	I certify that this organization does not spend federal appropriated funds for lobbying activities and certify my acceptance of and compliance with all <u>Lobbying Certification</u> requirements.
<input checked="" type="checkbox"/>	I certify my acceptance of and compliance with <u>Every Student Succeeds Act Provisions and Assurances</u> requirements.

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Schedule #2—Required Attachments and Provisions and Assurances

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Part 3: Program-Specific Provisions and Assurances☒ I certify my acceptance of and compliance with all program-specific provisions and assurances listed below.

#	Provision/Assurance
1.	The applicant provides assurance that program funds will supplement (increase the level of service), and not supplant (replace) state mandates, State Board of Education rules, and activities previously conducted with state or local funds. The applicant provides assurance that state or local funds may not be decreased or diverted for other purposes merely because of the availability of these funds. The applicant provides assurance that program services and activities to be funded from this grant will be supplementary to existing services and activities and will not be used for any services or activities required by state law, State Board of Education rules, or local policy.
2.	The applicant provides assurance that the application does not contain any information that would be protected by the Family Educational Rights and Privacy Act (FERPA) from general release to the public.
3.	The applicant provides assurance that all homeless children and unaccompanied youth have equal access to the same free, appropriate public education, including a public prekindergarten programs in accordance with TEC 29.153, as provided to other children and youth.
4.	The applicant provides assurance that it will review and revise any policies that may act as barriers to the identification, enrollment and retention of homeless children and unaccompanied youth; including policies related to outstanding fees, fines, absences, proof of residency, immunizations, birth certificates, guardianships, school records, transportation and other documentation.
5.	The applicant provides assurance that it will provide access to educational and other services needed for homeless children and unaccompanied youth, to ensure that such children and youth have an opportunity to meet the same challenging state academic standards to which all students are held.
6.	The applicant provides assurance that the use of subgrant funds will comply with section 722(g)(3) through (7) of the McKinney-Vento Homeless Assistance Act.
7.	The applicant provides assurance that all homeless children and unaccompanied youth receive prompt and appropriate placement in programs such as: Special Education, Career and Technical, Gifted and Talented, and Bilingual/ESL Education.
8.	The applicant provides assurance that all data requests from TEA and any entity acting on the behalf of TEA are accurately and promptly reported.
9.	The applicant provides assurance that midyear and end of year performance evaluation reports are submitted for each year grant funds are received.
10.	The applicant provides assurance that it will collaborate with district stakeholders to implement and monitor early warning academic interventions, to ensure on time promotion and graduation for homeless children and unaccompanied youth.
11.	The applicant provides assurance that collaboration will occur with the homeless liaison and district stakeholders for proper identification and coding of homeless children and unaccompanied youth.
12.	The applicant provides assurance that services provided by grant funds will not replace regular academic programs.
13.	The applicant provides assurance that all identified and enrolled homeless children and unaccompanied youth are accurately reported in TSDS PEIMS in a timely manner.
14.	The applicant provides assurance of collaboration with local social service agencies to provide support services and community resources for homeless children, unaccompanied youth and their families.
15.	The applicant provides assurance that all homeless children and unaccompanied youth receive free meals and transportation to the school of origin, when requested by the parent, guardian, or unaccompanied youth, if it is deemed in the best interest of the student.
16.	The applicant provides assurance that performance and fiscal monitoring reports are submitted for each year grant funds are received.
17.	The applicant provides assurance that it will remove barriers to accessing academic and extracurricular activities, including magnet school, summer school, career and technical education, advanced placement, online learning, and charter school programs.

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- | | |
|-----|--|
| 18. | The applicant provides assurance that at least one person affiliated with the management of this grant will attend required trainings. |
|-----|--|

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By TEA staff person:

Schedule #3—Certification of Shared Services

County-district number or vendor ID: 084908

Amendment # (for amendments only):

I, as one of the below member entity authorized officials, certify that to the best of my knowledge, the information contained in this application is correct and complete, that the entity that I represent has authorized me to file this application, and that such authorization action is recorded in the minutes of the local agency's board meeting.

The participating or intermediate education agency named has been designated as the administrative and fiscal agent for this project and is authorized to receive and expend funds for the conduct of this project. The fiscal agent is accountable for all shared services arrangement (SSA) activities and is therefore responsible for ensuring that all funds including payments to members of SSAs are expended in accordance with applicable laws and regulations.

All participating agencies have entered into a written SSA agreement that describes the responsibilities of the fiscal agent and SSA members, including the refund liability that may result from on-site monitoring or audits and the final disposition of equipment, facilities, and materials purchased for this project from funds specified below.

It is understood that the fiscal agent is responsible for the refund for any exceptions taken as a result of on-site monitoring or audits; however, based upon the SSA agreement, which must be on file with the fiscal agent for review, the fiscal agent may have recourse to the member agencies where the discrepancy(ies) occurred.

Any additional funds that result from an increase will not require additional signatures. **Each member identified below acknowledges accountability for the requirements contained in the provisions and assurances listed in Schedule #2, Parts 2 and 3, as applicable.** Each member entity certifies its agreement to participate in this SSA, as stated throughout this grant application.

#	County-District # and Name	Authorized Official Name and Signature	Telephone Number and Email Address	Funding Amount
Fiscal Agent				
1.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
Member Districts				
2.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
3.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
4.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
5.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
6.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
7.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
8.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	

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Schedule #3—Certification of Shared Services (cont.)				
County-district number or vendor ID: 084908			Amendment # (for amendments only):	
#	County-District # and Name	Authorized Official Name and Signature	Telephone Number and Email Address	Funding Amount
Member Districts				
9.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
10.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
11.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
12.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
13.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
14.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
15.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
16.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
17.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
18.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
19.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
20.	County-District #	Name	Telephone number	Funding amount
	County-District Name		Email address	
Grand total:				

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Schedule #5—Program Executive Summary

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Provide a brief overview of the program you plan to deliver. Refer to the instructions for a description of the requested elements of the summary. Response is limited to space provided, front side only, font size no smaller than 10 point Arial.

Hitchcock ISD will use these grant funds to ensure our homeless students are academically successful. These funds will benefit our students by allowing us to provide school of origin transportation, tutoring, school supplies and hygiene items to those in need. School supplies and backpacks will be given to identified students before they start school so they can go to school on the first day of school with supplies like their peers. Children in homeless situations need stability and normalcy in their lives and through our P. A. W. S. (Positive Assistance With Students), program in conjunction with these funds we strive to give them some stability and normalcy and to help them be successful academically. Hitchcock ISD is a school wide Title IA district. We are 82% economic disadvantaged and 15% of our students are homeless.

Meetings were held with the Homeless Liaison, Liaison Assistant, and the campus personnel to discuss the best practices to help our homeless students succeed. The budget is based on the outcomes of those meetings. The grant will be managed by the Homeless Liaison, Finance Director, and Grant Specialist.

Attendance and grades will be monitored regularly to ensure each student's academic success.

All statutory requirements are answered and met.

Hitchcock ISD is committed to serving our homeless students. We will continue to set aside Title IA funds and to accept donations to our P.A.W.S. program to ensure our students are successful.

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Schedule #5—Program Executive Summary (cont.)

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Provide a brief overview of the program you plan to deliver. Refer to the instructions for a description of the requested elements of the summary. Response is limited to space provided, front side only, font size no smaller than 10 point Arial.

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By TEA staff person:

Schedule #6—Program Budget Summary

County-district number or vendor ID: 084908	Amendment # (for amendments only):
Program authority: McKinney-Vento Homeless Assistance Act, Subtitle VII-B, reauthorized by Title IX, Part A, of the Every Student Succeeds Act (42 U.S.C. 11431 et seq.)	
Grant period: September 1, 2018, to August 31, 2019	Fund code/shared services arrangement code: 206/295

Budget Summary

Schedule #	Title	Class/ Object Code	Program Cost	Admin Cost	Total Budgeted Cost
Schedule #7	Payroll Costs (6100)	6100	\$12,000	\$	\$12,000
Schedule #8	Professional and Contracted Services (6200)	6200	\$3,165	\$	\$3,165
Schedule #9	Supplies and Materials (6300)	6300	\$1,000	\$	\$1,000
Schedule #10	Other Operating Costs (6400)	6400	\$1,500	\$	\$1,500
Schedule #11	Capital Outlay (6600)	6600	\$	\$	\$
Total direct costs:			\$17,665	\$	\$17,665
4.643% indirect costs (see note):			N/A	\$860.00	\$860.00
Grand total of budgeted costs (add all entries in each column):			\$17,665	\$860.00	\$18,525

Shared Services Arrangement

6493	Payments to member districts of shared services arrangements	\$	\$	\$
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Administrative Cost Calculation

Enter the total grant amount requested:	\$
Percentage limit on administrative costs established for the program (8%):	× .08
Multiply and round down to the nearest whole dollar. Enter the result.	\$
This is the maximum amount allowable for administrative costs, including indirect costs:	

NOTE: Indirect costs are calculated and reimbursed based on actual expenditures when reported in the expenditure reporting system, regardless of the amount budgeted and approved in the grant application. If indirect costs are claimed, they are part of the total grant award amount. They are not in addition to the grant award amount.

Indirect costs are not required to be budgeted in the grant application in order to be charged to the grant. Do not submit an amendment solely for the purpose of budgeting indirect costs.

If selected for a competitive grant, your award amount will be the lesser of the grand total of budgeted costs as stated on this schedule (the box with the bold outline), or the sum of all line items listed on this schedule, or the maximum allowable award amount. TEA is not responsible for math errors.

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Schedule #7—Payroll Costs (6100)

County-district number or vendor ID: 084908		Amendment # (for amendments only):	
Employee Position Title	Estimated # of Positions 100% Grant Funded	Estimated # of Positions <100% Grant Funded	Grant Amount Budgeted
Academic/Instructional			
1 Teacher			\$
2 Educational aide			\$
3 Tutor			\$
Program Management and Administration			
4 Project director			\$
5 Project coordinator			\$
6 Teacher facilitator			\$
7 Teacher supervisor			\$
8 Secretary/administrative assistant			\$
9 Data entry clerk			\$
10 Grant accountant/bookkeeper			\$
11 Evaluator/evaluation specialist			\$
Auxiliary			
12 Counselor			\$
13 Social worker			\$
14 Community liaison/parent coordinator			\$
Education Service Center (to be completed by ESC only when ESC is the applicant)			
15 ESC specialist/consultant			\$
16 ESC coordinator/manager/supervisor			\$
17 ESC support staff			\$
18 ESC other			\$
19 ESC other			\$
20 ESC other			\$
Other Employee Positions			
21 Homeless Liaison Assistant	1		\$12,000
22 Title			\$
23 Title			\$
24	Subtotal employee costs:		\$
Substitute, Extra-Duty Pay, Benefits Costs			
25 6112 Substitute pay			\$
26 6119 Professional staff extra-duty pay			\$
27 6121 Support staff extra-duty pay			\$
28 6140 Employee benefits			\$
29 61XX Tuition remission (IHEs only)			\$
30	Subtotal substitute, extra-duty, benefits costs		\$
31	Grand total (Subtotal employee costs plus subtotal substitute, extra-duty, benefits costs):		\$12,000

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division [Administering a Grant](#) page.

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Schedule #8—Professional and Contracted Services (6200)		
County-district number or vendor ID: 084908		Amendment # (for amendments only):
NOTE: Specifying an individual vendor in a grant application does not meet the applicable requirements for sole-source providers. TEA's approval of such grant applications does not constitute approval of a sole-source provider.		
Professional and Contracted Services Requiring Specific Approval		
Expense Item Description		Grant Amount Budgeted
6269	Rental or lease of buildings, space in buildings, or land	\$
	Specify purpose:	
a. Subtotal of professional and contracted services (6200) costs requiring specific approval:		\$
Professional and Contracted Services		
#	Description of Service and Purpose	Grant Amount Budgeted
1		\$
2		\$
3		\$
4		\$
5		\$
6		\$
7		\$
8		\$
9		\$
10		\$
11		\$
12		\$
13		\$
14		\$
b. Subtotal of professional and contracted services:		\$
c. Remaining 6200—Professional and contracted services that do not require specific approval:		\$3,165
(Sum of lines a, b, and c) Grand total		\$3,165

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division Administering a Grant page.

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Schedule #9—Supplies and Materials (6300)

County-District Number or Vendor ID: 084908		Amendment number (for amendments only):
Expense Item Description		Grant Amount Budgeted
6300	Total supplies and materials that do not require specific approval:	\$1,000
Grand total:		\$1,000

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division [Administering a Grant](#) page.

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Schedule #10—Other Operating Costs (6400)

County-District Number or Vendor ID: 084908		Amendment number (for amendments only):
Expense Item Description		Grant Amount Budgeted
6411	Out-of-state travel for employees. Must be allowable per Program Guidelines and grantee must keep documentation locally.	\$
6412/ 6494	Educational Field Trip(s). Must be allowable per Program Guidelines and grantee must keep documentation locally.	\$
Subtotal other operating costs requiring specific approval:		\$
Remaining 6400—Other operating costs that do not require specific approval:		\$1,500
Grand total:		\$1,500

In-state travel for employees does not require specific approval.

For budgeting assistance, see the Allowable Cost and Budgeting Guidance section of the Grants Administration Division [Administering a Grant](#) page.

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Schedule #12—Demographics and Participants to Be Served with Grant Funds

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Part 1: Student Demographics of Population To Be Served With Grant Funds. Enter the data requested for the population to be served by this grant program. If data is not available, enter DNA. Use the comment section to add a description of any data not specifically requested that is important to understanding the population to be served by this grant program. Response is limited to space provided. Use Arial font, no smaller than 10 point.

Student Category	Student Number	Student Percentage	Comment
Economically disadvantaged	1148	82%	
Identified homeless students	272	19%	
Students identified homeless with a 5A Crisis Code	10	0.713%	
Students identified homeless with a 5B Crisis Code	0	0	
Students identified homeless with a 5C Crisis Code	100	7.13%	
Attendance rate for identified homeless students	NA	95.32%	
Attendance rate for economically disadvantaged students	NA	93%	

Part 2: Students To Be Served With Grant Funds. Enter the number of students in each grade, by type of school, projected to be served under the grant program.

School Type: ☒ Public ☐ Open-Enrollment Charter

Students

PK	K	1	2	3	4	5	6	7	8	9	10	11	12	Total
24	35	27	29	21	24	13	11	15	5	17	20	15	16	272

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By TEA staff person:

Schedule #13—Needs Assessment

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Part 1: Process Description. A needs assessment is a systematic process for identifying and prioritizing needs, with "need" defined as the difference between current achievement and desired outcome or required accomplishment. Describe your needs assessment process, including a description of how needs are prioritized. If this application is for a district level grant that will only serve specific campuses, list the name of the campus(es) to be served and why they were selected. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Hitchcock ISD needs assessment report was done according to the accountability rating report by the Texas Education Agency to identify areas that require improvement. Campus level committees meet to identify their needs and those needs are then presented to the District improvement team. All district needs are then collated into the District and Campus Improvement Plans. Needs for our homeless students were prioritized after discussion between the campuses and District Improvement teams and our Homeless Liaison and the Homeless Liaison Assistant. Specific needs that have been found are: transportation, tutoring, school supplies, clothes and basic hygiene supplies. Tutoring is offered to all students before and after school. Some school supplies and clothing is donated through our community partnerships. Grades and attendance are monitored by the Homeless Liaison Assistant and if issues arise she meets with the campus counselor and the student to gain understanding about the issue and help where needed if possible. All Hitchcock ISD students who are homeless under the McKinney Vento act will be served with TEHCY funds.

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Schedule #13—Needs Assessment (cont.)

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Part 2: Alignment with Grant Goals and Objectives. List your top five needs, in rank order of assigned priority. Describe how those needs would be effectively addressed by implementation of this grant program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

#	Identified Need	How Implemented Grant Program Would Address
1.	School of Origin/ Homeless Transportation	School of Origin Transportation would be paid for through grant funding and Title IA set aside.
2.	Tutorials	Tutoring will be held before and after school for all students with transportation provided for after school tutorials.
3.	School Supplies	Needed school supplies that were not donated would be funded with grant funds.
4.	Hygiene Items	Needed female/male hygiene items will be purchased using grant funds.
5.		

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By TEA staff person:

Schedule #14—Management Plan

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Part 1: Staff Qualifications. List the titles of the primary project personnel and any external consultants projected to be involved in the implementation and delivery of the program, along with desired qualifications, experience, and any requested certifications. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

#	Title	Desired Qualifications, Experience, Certifications
1.	Homeless Liaison	Finance Director / Oversees the Program
2.	Homeless Liaison Assistant	Homeless Liaison Assistant / Directly assists the students and parents
3.	Campus Counselors	TEA Certified / works with students, parents and Homeless Liaison Assistant to ensure needs are met.
4.	Grant Specialist	Ensures grant application and compliance reports are completed. Ensures monies are spent according to TEA and EDGAR.
5.		

Part 2: Milestones and Timeline. Summarize the major objectives of the planned project, along with defined milestones and projected timelines. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

#	Objective	Milestone	Begin Activity	End Activity
1.	Ensure transportation is provided	1. Students attendance rates are monitored	09/01/2018	05/31/2019
		2.	XX/XX/XXXX	XX/XX/XXXX
		3.	XX/XX/XXXX	XX/XX/XXXX
		4.	XX/XX/XXXX	XX/XX/XXXX
		5.	XX/XX/XXXX	XX/XX/XXXX
2.	Tutoring is taken advantage of	1. Sign in Sheets	01/01/2018	05/01/2019
		2. Monitor Grades	01/01/2018	05/31/2019
		3.	XX/XX/XXXX	XX/XX/XXXX
		4.	XX/XX/XXXX	XX/XX/XXXX
		5.	XX/XX/XXXX	XX/XX/XXXX
3.		1.	XX/XX/XXXX	XX/XX/XXXX
		2.	XX/XX/XXXX	XX/XX/XXXX
		3.	XX/XX/XXXX	XX/XX/XXXX
		4.	XX/XX/XXXX	XX/XX/XXXX
		5.	XX/XX/XXXX	XX/XX/XXXX
4.		1.	XX/XX/XXXX	XX/XX/XXXX
		2.	XX/XX/XXXX	XX/XX/XXXX
		3.	XX/XX/XXXX	XX/XX/XXXX
		4.	XX/XX/XXXX	XX/XX/XXXX
		5.	XX/XX/XXXX	XX/XX/XXXX
5.		1.	XX/XX/XXXX	XX/XX/XXXX
		2.	XX/XX/XXXX	XX/XX/XXXX
		3.	XX/XX/XXXX	XX/XX/XXXX
		4.	XX/XX/XXXX	XX/XX/XXXX
		5.	XX/XX/XXXX	XX/XX/XXXX

Unless pre-award costs are specifically approved by TEA, grant funds will be used to pay only for activities occurring between the beginning and ending dates of the grant, as specified on the Notice of Grant Award.

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By TEA staff person:

Schedule #14—Management Plan (cont.)

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Part 3: Feedback and Continuous Improvement. Describe the process and procedures your organization currently has in place for monitoring the attainment of goals and objectives. Include a description of how the plan for attaining goals and objectives is adjusted when necessary and how changes are communicated to administrative staff, teachers, students, parents, and members of the community. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Hitchcock ISD Homeless Liaison Assistant conducts meetings with school principals, counselors, parents, and teachers to discuss the educational needs of the homeless students. They also discuss any barriers and ways to break said barriers. Data disaggregation from assessments, attendance and progress will be reviewed and adjustments will be made based on the specific needs.

The Homeless Liaison and assistant provide training on the identification process and enrollment practices. Reports on attendance and grades will be reviewed every six weeks. The Liaison Assistant will meet with counselors and principals on an as needed bases to discuss grades and attendance of the homeless students.

The liaison assistant will meet with the transportation department on an ongoing basis to ensure all children are transported to school in a timely manner.

The Liaison, Liaison Assistant and Grant Specialist will review activities to see that they are carried out as planned, reaching the anticipated number of students and families in the time frame identified. This will ensure that any needed adjustments are identified and made.

Any changes made are communicated through meetings, email and phone calls.

Part 4: Sustainability and Commitment. Describe any ongoing, existing efforts that are similar or related to the planned project. How will you demonstrate a commitment to education for all homeless children and unaccompanied youth? Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Hitchcock ISD has created a Positive Assistance Working For Students center, (P.A.W.S.). Donations of school supplies and clothing are made to the center, which helps us ensure our homeless students can start school with at least the basic school supplies and a couple of new outfits to wear. This helps our students have a smooth transition while attending school. We try to ensure that no matter what time of year a homeless student enrolls we can service them through our P.A.W.S. program.

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By TEA staff person:

Schedule #15—Project Evaluation

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Part 1: Evaluation Design. List the methods and processes you will use on an ongoing basis to examine the effectiveness of project strategies, including the indicators of program accomplishment that are associated with each. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

#	Evaluation Method/Process	Associated Indicator of Accomplishment	
1.	Transportation	1.	Correct paperwork is in place. Attendance is monitored
		2.	
		3.	
2.	Tutoring	1.	Sign in sheets
		2.	
		3.	
3.	School Supplies/Hygiene Items	1.	Distribution rosters kept by Liaison Assistant
		2.	
		3.	
4.		1.	
		2.	
		3.	
5.		1.	
		2.	
		3.	

Part 2: Data Collection and Problem Correction. Describe the processes for collecting data that are included in the evaluation design, including program-level data such as program activities and the number of participants served, and student-level academic data, including achievement results and attendance data. How are problems with project delivery to be identified and corrected throughout the project? Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

The process for the collection of data includes monitoring of attendance and grades by the Homeless Liaison Assistant. The attendance data is checked every third and sixth week while the grades are checked every six weeks. If issues are noted with attendance and/or grades they are addressed at that time. At mid-year, benchmarks are analyzed, successes and best practices noted, and any needed changes or adjustments will be made in order to improve outcomes for the duration of the school year.

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Schedule #16—Responses to Statutory Requirements

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Statutory Requirement 1: Describe the services and program that will be provided to address the identified needs.

Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Activity Description	Estimated # to Participate	General Location and Position Responsible for Completing	Documentary Evidence and Position Responsible for Collecting Evidence	Related Need(s) (from Schedule 13)
School of Origin/Homeless Transportation	25	Hotels, Campuses etc. Homeless Liaison Asst. and Transportation Dept.	Transportation logs/Transportation Director and Homeless Liaison Asst.	1
Tutorials	145	Campuses/Teachers	Sign in sheets	2
School Supplies	227	Campuses/P.A.W.S. Room/Liaison Assistant	Supply distribution rosters	3
Hygiene Items	75	P.A.W.S. Room/Liaison Assistant	Distribution rosters	4

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Schedule #16—Responses to Statutory Requirements (cont.)

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Statutory Requirement 2a: Identify collaborators from other state and local agencies that serve homeless children and unaccompanied youth and describe the collaborative activities. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

#	LEA/ESC or Community Collaborator (Do not list personal names. Only list names of departments or organizations)	Brief Description of Collaborative Activities
Ex. 1:	National Honor Society at ABC HS	Provides weekend snack packs once per week for elementary students
Ex. 2:	Interfaith Ministries	Provides new blankets for homeless children and provides vouchers for shoes at local stores.
1.	Hitchcock Family Welfare	Assist with clothing and utilities
2.	HIS Ministries	Assist with clothing, food and utilities
3.	Back Pack Buddy Program	Provides backpacks with food
4.	Teen Clinic	Provides free immunizations and basic medical treatment at no charge
5.	HISD personnel	Adopt a Family at Christmas and Thanksgiving
6.	Strong Tower Ministries	Sponsors "Stuff the Bus" school supply drive
7.	Positive Assistance Working with Students (P.A. W. S.)	Provide school supplies, clothes, and hygiene products. Help families with Christmas
8.	Hitchcock Education Foundation	Donations of school supplies and clothing. Help with Christmas
9.		
10.		
11.		
12.		
13.		
14.		
15.		

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Schedule #16—Responses to Statutory Requirements (cont.)

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Statutory Requirement 2b: Describe how the proposed use of funds will facilitate the identification, enrollment, and educational success of homeless children and unaccompanied youth. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

All new and returning students must complete a registration packet for enrollment in the District. Included in this packet is a required form, the SRQ, (Student Resident Questionnaire). This form is looked at by the campus registrar and follows a flow chart to determine if the child will be identified as homeless. If criteria is met the SRQ is forwarded to the Liaison Assistant to review and contact the parents to complete the process. Funding of school of origin transportation is important in that it keeps the student in the school environment that he/she is used to which in turn improves attendance and grades.

Statutory Requirement 2c: Describe the extent to which the applicant will promote the meaningful involvement of parents or guardians of homeless children and the youth in the education of their children. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Once a student is identified as homeless, the Liaison Assistant will contact the parents or guardians and explains our program to them and the resources that Hitchcock ISD has available. They are encouraged to attend all parent/teacher conferences and parental involvement meetings. Parents are also encouraged to call the Liaison Assistant with any questions or concerns they may have regarding their child.

Statutory Requirement 2d: Describe the extent to which homeless children and unaccompanied youth will be integrated into the regular education program. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Hitchcock ISD does not discriminate nor does it single out students. All students are offered the same opportunities of a well rounded education. Any activities offered such as tutoring are offered to all students.

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Schedule #16—Responses to Statutory Requirements (cont.)

County-district number or vendor ID: 084908

Amendment # (for amendments only):

Statutory Requirement 3a: Describe the process for the development and preparation of the LEA's plan for coordinating services for eligible homeless children and unaccompanied youth using Title I, Part A reservations/set-asides. In the chart, include the actual set-aside for 2016–2017 and the planned set-aside for 2017–2018. For applicants applying as a SSA, provide set-asides for each LEA. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Title I, Part A set aside funds for homeless students is used in conjunction with TEHCY grant funds to pay for school of origin transportation, summer school, after school tutoring and the Liaison Assistants salary and benefits. Hitchcock ISD is a school wide Title IA district.

	Reservation/Set-Aside Amount	Use/Activities
Actual Set-Aside for 2016–2017	\$4,000	Homeless Liaison salary (benefits) and School of Origin Transportation.
Planned Set-Aside for 2017–2018	\$4,000	School of Origin Transportation and the Homeless Liaisons salary (benefits).

Statutory Requirement 3b: How does the LEA determine its reservation/set-aside amount, how does the LEA assist staff in understanding the LEA's policy/procedure to support homeless students using these funds, and how does the LEA address the needs of homeless students in the Campus Improvement Plan? Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Hitchcock ISD has determined that setting aside between 0.75% and 1% of its Title IA funds is reasonable and necessary for program goals to be achieved. Hitchcock ISD has used more than the set aside to meet the needs of our students, especially with transportation. Training is held at least yearly with staff on ways to support homeless students using these funds. All student needs are addressed in the Campus Improvement Plans and the District Improvement Plan.

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Schedule #16—Responses to Statutory Requirements (cont.)	
County-district number or vendor ID: 084908	Amendment # (for amendments only):
Statutory Requirement 4: Indicate if the applicant has current policies and procedures and their applicable revision date. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.	
Required Policies and Procedures	Current Policy/Procedure (Indicate Yes or No)
School Selection: Each homeless child and unaccompanied youth has a right to remain at his or her school of origin or to attend any school that serves students who live in the attendance area in which the child or unaccompanied youth is living. State law also permits homeless children and youth to attend any school district in Texas (TEC Sect. 25.001(5)).	Yes
Enrollment: Homeless children and unaccompanied youth must be enrolled immediately and may not be denied or delayed enrollment due to the lack of any documentation normally required for enrollment.	Yes
Transportation: Shall be provided to and from the school of origin for a homeless child or unaccompanied youth, when requested by the parent, guardian, or unaccompanied youth.	Yes
Services: Homeless children and unaccompanied youth must receive services comparable to services offered to other students.	Yes
Disputes: If a dispute arises over eligibility, school selections, or enrollment; the homeless child or unaccompanied youth shall be the school in which the parent, guardian or unaccompanied youth seeks enrollment pending resolution of the dispute. Do you have a Dispute Resolution Policy?	Yes
Free meals: Homeless children and unaccompanied youth are categorically eligible for free meals from the date of enrollment.	Yes
Title I: Homeless children and unaccompanied youth are categorically eligible for Title I coordinated services, regardless of what school they attend.	Yes
Training: Liaisons conduct professional development to improve identification, heighten awareness, and capacity to respond to the specific needs of homeless students and unaccompanied youth to the following LEA and school staff at least once a year: assistant superintendents, principals, assistant principals, federal program administrators, registrars, school secretaries, school counselors, school social workers, bus drivers, cafeteria workers, school nurses and teachers.	Yes
Coordination: Liaisons shall coordinate and provide referrals to medical, housing, public and private service providers; to support the education of homeless and unaccompanied homeless youth.	Yes
Pre-School: Homeless children have access to enrollment in LEA-based prekindergarten programs in accordance with TEC 29.153.	Yes
Transition to Higher Education: Liaisons shall coordinate individualized academic counseling services to prepare unaccompanied youth for college and career; including but not limited to, providing verification of their independent status for post-secondary applications; college visits; financial aid; on-campus support services; etc.	Yes

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Schedule #17—Responses to TEA Program Requirements

County-district number or vendor ID: 084908

Amendment # (for amendments only):

TEA Program Requirement 1: Describe the process or procedures that are utilized to identify and/or enroll homeless students and unaccompanied youth who: (a) are entering and/or returning to their schools from summer or holiday break, (b) become homeless after the school year has started, (c) are not currently enrolled or attending school, and (d) are eligible for early childhood and/or prekindergarten programs. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Hitchcock ISD policy is that all new and returning students complete a registration packet for their particular campus. Within this packet is an SRQ, (Student Residency Questionnaire). After the form is received the registrars follow a flow chart to identify if the child is homeless. SRQ,s that meet at least one of the criteria are pulled and the Liaison Assistant reviews the form. She talks to the parents and explains our program to them. Parents are required to notify the school when they change their address during the school year. Registrars ask parents or guardians to fill out a new SRQ and if they meet the criteria the liaison assistant is contacted. Teachers, counselors and nurses will also report any information a student may have shared about their living situation. The liaison assistant works closely with local churches, the police department and community organizations to identify potential homeless students not enrolled in school.

The district has a Head Start program for early identification of homeless students.

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Schedule #17—Responses to TEA Program Requirements (cont.)

County-district number or vendor ID: 084908

Amendment # (for amendments only):

TEA Program Requirement 2: Describe the training and professional development that are in place to assist with the identification, enrollment, and increased capacity to respond to the specific educational needs of homeless children and unaccompanied youth, including for: (a) administrative, instructional, and support staff; and (b) service providers and/or community collaborators. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Homeless liaison, homeless liaison assistant, registrars, counselors and administrators meet during the summer and on a regular basis during the school year to review and receive training regarding the identification and enrollment of students experiencing homelessness on the following: SRQ form, Hitchcock ISF SRQ verification process flow chart, and Indicator Process power point training.

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Schedule #17—Responses to TEA Program Requirements (cont.)

County-district number or vendor ID: 084908

Amendment # (for amendments only):

TEA Program Requirement 3: Describe how early interventions and ongoing progress monitoring will be implemented to address the academic needs of homeless children and youth. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Grades and attendance for homeless students are monitored regularly by the liaison assistant. If she notices problems or issues she meets with the campus counselor, the student and the parent or guardian. If grades are an issue the child is encouraged to participate in tutoring and any other offered programs. If transportation is an issue the liaison assistant contacts the transportation department and ensures transportation is provided.

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Schedule #17—Responses to TEA Program Requirements (cont.)

County-district number or vendor ID: 084908

Amendment # (for amendments only):

TEA Program Requirement 4: Describe the procedures in place to review, monitor, and implement academic support services to ensure secondary homeless students are on track for grade-level promotion, graduation, and college and career readiness. Response is limited to space provided, front side only. Use Arial font, no smaller than 10 point.

Grades and scores are reviewed and monitored regularly by the liaison assistant. If an issue arises the liaison meets with the counselor to determine what interventions may be needed. The liaison and the High School staff work closely together to monitor students in line to graduate and to make sure all requirements are met. College and Career counseling is provided to all students.

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Schedule #18—Equitable Access and Participation

County-District Number or Vendor ID: 084908 Amendment number (for amendments only):

No Barriers

#	No Barriers	Students	Teachers	Others
000	The applicant assures that no barriers exist to equitable access and participation for any groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Gender-Specific Bias

#	Strategies for Gender-Specific Bias	Students	Teachers	Others
A01	Expand opportunities for historically underrepresented groups to fully participate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A02	Provide staff development on eliminating gender bias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A03	Ensure strategies and materials used with students do not promote gender bias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A04	Develop and implement a plan to eliminate existing discrimination and the effects of past discrimination on the basis of gender	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A05	Ensure compliance with the requirements in Title IX of the Education Amendments of 1972, which prohibits discrimination on the basis of gender	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A06	Ensure students and parents are fully informed of their rights and responsibilities with regard to participation in the program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Cultural, Linguistic, or Economic Diversity

#	Strategies for Cultural, Linguistic, or Economic Diversity	Students	Teachers	Others
B01	Provide program information/materials in home language	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B02	Provide interpreter/translator at program activities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B03	Increase awareness and appreciation of cultural and linguistic diversity through a variety of activities, publications, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B04	Communicate to students, teachers, and other program beneficiaries an appreciation of students' and families' linguistic and cultural backgrounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B05	Develop/maintain community involvement/participation in program activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B06	Provide staff development on effective teaching strategies for diverse populations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B07	Ensure staff development is sensitive to cultural and linguistic differences and communicates an appreciation for diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B08	Seek technical assistance from education service center, technical assistance center, Title I, Part A school support team, or other provider	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B09	Provide parenting training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B10	Provide a parent/family center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B11	Involve parents from a variety of backgrounds in decision making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Schedule #18—Equitable Access and Participation (cont.)

County-District Number or Vendor ID: 084908

Amendment number (for amendments only):

Barrier: Cultural, Linguistic, or Economic Diversity (cont.)

#	Strategies for Cultural, Linguistic, or Economic Diversity	Students	Teachers	Others
B12	Offer "flexible" opportunities for parent involvement including home learning activities and other activities that don't require parents to come to the school	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B13	Provide child care for parents participating in school activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B14	Acknowledge and include family members' diverse skills, talents, and knowledge in school activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B15	Provide adult education, including high school equivalency (HSE) and/or ESL classes, or family literacy program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B16	Offer computer literacy courses for parents and other program beneficiaries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B17	Conduct an outreach program for traditionally "hard to reach" parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B18	Coordinate with community centers/programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B19	Seek collaboration/assistance from business, industry, or institutions of higher education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B20	Develop and implement a plan to eliminate existing discrimination and the effects of past discrimination on the basis of race, national origin, and color	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B21	Ensure compliance with the requirements in Title VI of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, national origin, and color	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B22	Ensure students, teachers, and other program beneficiaries are informed of their rights and responsibilities with regard to participation in the program	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
B23	Provide mediation training on a regular basis to assist in resolving disputes and complaints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Gang-Related Activities

#	Strategies for Gang-Related Activities	Students	Teachers	Others
C01	Provide early intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C02	Provide counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C03	Conduct home visits by staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C04	Provide flexibility in scheduling activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C05	Recruit volunteers to assist in promoting gang-free communities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C06	Provide mentor program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C07	Provide before/after school recreational, instructional, cultural, or artistic programs/activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Schedule #18—Equitable Access and Participation (cont.)

County-District Number or Vendor ID: 084908

Amendment number (for amendments only):

Barrier: Gang-Related Activities (cont.)

#	Strategies for Gang-Related Activities	Students	Teachers	Others
C08	Provide community service programs/activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C09	Conduct parent/teacher conferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C10	Strengthen school/parent compacts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C11	Establish collaborations with law enforcement agencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C12	Provide conflict resolution/peer mediation strategies/programs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
C13	Seek collaboration/assistance from business, industry, or institutions of higher education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C14	Provide training/information to teachers, school staff, and parents to deal with gang-related issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Drug-Related Activities

#	Strategies for Drug-Related Activities	Students	Teachers	Others
D01	Provide early identification/intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D02	Provide counseling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D03	Conduct home visits by staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D04	Recruit volunteers to assist in promoting drug-free schools and communities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D05	Provide mentor program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D06	Provide before/after school recreational, instructional, cultural, or artistic programs/activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D07	Provide community service programs/activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D08	Provide comprehensive health education programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D09	Conduct parent/teacher conferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D10	Establish school/parent compacts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D11	Develop/maintain community collaborations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D12	Provide conflict resolution/peer mediation strategies/programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D13	Seek collaboration/assistance from business, industry, or institutions of higher education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D14	Provide training/information to teachers, school staff, and parents to deal with drug-related issues	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Visual Impairments

#	Strategies for Visual Impairments	Students	Teachers	Others
E01	Provide early identification and intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E02	Provide program materials/information in Braille	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Schedule #18—Equitable Access and Participation (cont.)

County-District Number or Vendor ID: 084908

Amendment number (for amendments only):

Barrier: Visual Impairments

#	Strategies for Visual Impairments	Students	Teachers	Others
E03	Provide program materials/information in large type	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E04	Provide program materials/information in digital/audio formats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E05	Provide staff development on effective teaching strategies for visual impairment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E06	Provide training for parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E07	Format materials/information published on the internet for ADA accessibility	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
E99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Hearing Impairments

#	Strategies for Hearing Impairments			
F01	Provide early identification and intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F02	Provide interpreters at program activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F03	Provide captioned video material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F04	Provide program materials and information in visual format	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F05	Use communication technology, such as TDD/relay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F06	Provide staff development on effective teaching strategies for hearing impairment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F07	Provide training for parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Learning Disabilities

#	Strategies for Learning Disabilities	Students	Teachers	Others
G01	Provide early identification and intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
G02	Expand tutorial/mentor programs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G03	Provide staff development in identification practices and effective teaching strategies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G04	Provide training for parents in early identification and intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Other Physical Disabilities or Constraints

#	Strategies for Other Physical Disabilities or Constraints	Students	Teachers	Others
H01	Develop and implement a plan to achieve full participation by students with other physical disabilities or constraints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H02	Provide staff development on effective teaching strategies	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
H03	Provide training for parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Barrier: Inaccessible Physical Structures

#	Strategies for Inaccessible Physical Structures	Students	Teachers	Others
J01	Develop and implement a plan to achieve full participation by students with other physical disabilities/constraints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J02	Ensure all physical structures are accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
J99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Absenteeism/Ttruancy

#	Strategies for Absenteeism/Ttruancy	Students	Teachers	Others
K01	Provide early identification/intervention	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
K02	Develop and implement a truancy intervention plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
K03	Conduct home visits by staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K04	Recruit volunteers to assist in promoting school attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K05	Provide mentor program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K06	Provide before/after school recreational or educational activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K07	Conduct parent/teacher conferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K08	Strengthen school/parent compacts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K09	Develop/maintain community collaborations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K10	Coordinate with health and social services agencies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K11	Coordinate with the juvenile justice system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K12	Seek collaboration/assistance from business, industry, or institutions of higher education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: High Mobility Rates

#	Strategies for High Mobility Rates	Students	Teachers	Others
L01	Coordinate with social services agencies	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
L02	Establish collaborations with parents of highly mobile families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L03	Establish/maintain timely record transfer system	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
L99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Lack of Support from Parents

#	Strategies for Lack of Support from Parents	Students	Teachers	Others
M01	Develop and implement a plan to increase support from parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M02	Conduct home visits by staff	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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Barrier: Lack of Support from Parents (cont.)

#	Strategies for Lack of Support from Parents	Students	Teachers	Others
M03	Recruit volunteers to actively participate in school activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M04	Conduct parent/teacher conferences	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
M05	Establish school/parent compacts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M06	Provide parenting training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M07	Provide a parent/family center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M08	Provide program materials/information in home language	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
M09	Involve parents from a variety of backgrounds in school decision making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M10	Offer "flexible" opportunities for involvement, including home learning activities and other activities that don't require coming to school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M11	Provide child care for parents participating in school activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M12	Acknowledge and include family members' diverse skills, talents, and knowledge in school activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M13	Provide adult education, including HSE and/or ESL classes, or family literacy program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M14	Conduct an outreach program for traditionally "hard to reach" parents	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
M15	Facilitate school health advisory councils four times a year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Shortage of Qualified Personnel

#	Strategies for Shortage of Qualified Personnel	Students	Teachers	Others
N01	Develop and implement a plan to recruit and retain qualified personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N02	Recruit and retain personnel from a variety of racial, ethnic, and language minority groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N03	Provide mentor program for new personnel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
N04	Provide intern program for new personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N05	Provide an induction program for new personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N06	Provide professional development in a variety of formats for personnel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
N07	Collaborate with colleges/universities with teacher preparation programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Lack of Knowledge Regarding Program Benefits

#	Strategies for Lack of Knowledge Regarding Program Benefits	Students	Teachers	Others
P01	Develop and implement a plan to inform program beneficiaries of program activities and benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P02	Publish newsletter/brochures to inform program beneficiaries of activities and benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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Barrier: Lack of Knowledge Regarding Program Benefits (cont.)

#	Strategies for Lack of Knowledge Regarding Program Benefits	Students	Teachers	Others
P03	Provide announcements to local radio stations, newspapers, and appropriate electronic media about program activities/benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Lack of Transportation to Program Activities

#	Strategies for Lack of Transportation	Students	Teachers	Others
Q01	Provide transportation for parents and other program beneficiaries to activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q02	Offer "flexible" opportunities for involvement, including home learning activities and other activities that don't require coming to school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q03	Conduct program activities in community centers and other neighborhood locations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q99	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Barrier: Other Barriers

#	Strategies for Other Barriers	Students	Teachers	Others
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			
Z99	Other barrier	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other strategy			

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