**Connect For Success**

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| PART I: Cover PageComplete and attach as the first page of application. | | | | | | | | | | |
| **Name of Local Education Agency:** | | | |  | | | | **District Code:** | |  |
| **Mailing Address:** | |  | | | | | | **DUNS #:** |  | |
| **Authorized Representative:** | | |  | | | | | | | |
| **Telephone:** |  | | | | **E-mail:** | |  | | | |
| **Signature:** |  | | | | | | | | | |
| **Program Contact:** | | |  | | | | | | | |
| **Telephone:** |  | | | | **E-mail:** | |  | | | |
| **Signature:** |  | | | | | | | | | |
| **Title I Director:** | | |  | | | | | | | |
| **Telephone:** |  | | | | **E-mail:** | |  | | | |
| **Signature:** |  | | | | | | | | | |
| **Special Education Director:** | | |  | | | | | | | |
| **Telephone:** |  | | | | **E-mail:** | |  | | | |
| **Signature:** |  | | | | | | | | | |
| **Fiscal Manager:** | | |  | | | | | | | |
| **Mailing Address:** | |  | | | | | | | | |
| **Telephone:** |  | | | | **E-mail:** | |  | | | |
| **Region:** *Indicate the region(s) of Colorado this proposal will directly impact* | | | | | | | | | | |
| □ **Metro** □ **Pikes Peak** □ **North Central** □ **Northwest** □ **West Central**  □ **Southwest** □ **Southeast** □ **Northeast** | | | | | | | | | | |
| **Recipient Schools:** *Indicate the intended recipient schools (additional rows may be added).* | | | | | | | | | | |
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|  | | | | | | |  | | | |
| **Amount Requested:** *Indicate the total amount of funding you are requesting for this grant***.** | | | | | | | | | | |
| **Year 1 (January 1, 2016 – June 30, 2016)** | | | | | $ |  | | | | |
| **Year 2 (July 1, 2016 – June 30, 2017)** | | | | | $ |  | | | | |
| **Year 3 (July 1, 2017 – June 30, 2018)** | | | | | $ |  | | | | |

**Please note:** If grant application is approved, funding will not be awarded until all signatures are in place. Please attempt to obtain all signatures before submitting the application.

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| PART IA: Recipient School Information and Signature PageComplete and attach after cover page. If necessary, additional copies of this page may be attached in order to include each participating school. |

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| **Intended Recipient School Information and Signature**  Copy and complete this page for each intended recipient school. | | | | | | |
| **School Name:** | |  | | | **School Code:** |  |
| **School Address:** | |  | | | | |
| **Principal Name:** | |  | | | | |
| **Telephone:** |  | | **E-mail:** |  | | |
| **Principal Signature:** | |  | | | | |

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| PART IB: Assurances Complete and attach after recipient school information and signature page(s). |

**Connect For Success**

*The School Board President and Board-Appointed Authorized Representative must sign below to indicate their approval of the contents of the application, and the receipt of program funds.*

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| --- | --- | --- | --- | --- |
| On | (date) | , 2015, | the Board of | (district, BOCES or charter school) |
| hereby agrees to the following assurances: | | | | |

Teacher Commitments:

* Rethink current practices and modify those that are ineffective based on examination of student data.
* Develop a theoretical and practical knowledge of best practice.
* Administer screening, diagnostic, and classroom progress monitoring assessments to inform instructional practice.
* Design appropriate interventions for minority students, students experiencing poverty, students with disabilities and English Learners.
* Help shape the culture of the school in a positive way.

School Commitments:

* Provide the Colorado Department of Education with the annual evaluation information required on page 5 and in the **Progress Report** (Attachment B) of the Request for Proposal.
* School leadership team with district representation will attend the state sponsored professional development opportunities (see timeline on page 3).
* School Leadership will:

Conduct regular instructional walkthroughs.

Perform ongoing performance monitoring of instructional staff and provide timely feedback to teachers.

Ensure ongoing data analyses and participating in data meetings.

Ensure that time for data meetings, analysis, and use is protected.

Ensure time for collaboration is created and protected.

Make student-centered decisions (including grouping of students, class schedules, etc.).

Set high expectations of staff, families, and students.

* Budget sufficient funds and time to participate in required grant activities.
* Address issues of teacher stability and training.
* Exercise leveraging of Title I, IDEA, and other funding sources.
* Evaluate the impact of these funds on student achievement and participate in the external evaluation of the initiative.
* Reevaluate use of Title I, IDEA funds (e.g., Coordinated Early Intervening Services - CEI) to meet needs of minority students; students experiencing poverty; students with disabilities; and English Learners.

District/Administrative Unit Commitments:

* Hire or designate an Implementation Coach that meets the minimum competencies outlined in this RFP.
* Ensure both district and building leadership possess the qualifications and have committed the time necessary to accomplish grant activities to lead to student achievement gains.
* Allow flexibility for school to adjust for mid-course corrections if data does not indicate progress toward increasing achievement.
* Support school in using data to monitor student progress to inform instructional practice to accelerate performance.
* Conduct monthly instructional rounds at school site (district/school/implementation coach, if applicable).
* Foster principal’s leadership in the school and support leadership growth opportunities.
* Ensure that funds are being leveraged with other local, state, and federal funds (e.g., Titles I, II, III, V and IDEA) and that accountability for cost-effective management is provided.
* The grantee will work with and provide requested data to CDE for the Connect for Success funding opportunity within the time frames specified.
* The grantee will not discriminate against anyone regarding race, gender, national origin, color, disability, or age.
* Funds are used to supplement and not supplant any moneys currently being used to provide services and grant dollars will be administered by the appropriate fiscal agent.
* That funded projects will maintain appropriate fiscal and program records and that fiscal audits of this program will be conducted by the grantees as a part of their regular audits.
* That if any findings of misuse of these funds are discovered, project funds will be returned to CDE.
* The grantee will maintain sole responsibility for the project even though subcontractors may be used to perform certain services.

The Colorado Department of Education may terminate a grant award upon thirty (30) days’ notice if it is deemed by CDE that the applicant is not fulfilling the requirements of the funded program as specified in the approved project application, or if the program is generating less than satisfactory results.

Project modifications and changes in the approved budget must be requested in writing and be approved in writing by the Colorado Department of Education before modifications are made to the expenditures. Please contact Evan Davis ([Davis\_E@cde.state.co.us](mailto:Davis_E@cde.state.co.us) or 303‐866‐6129) of CDE’s Grants Fiscal Management for any modifications.

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| Name of School Board President/BOCES President/Charter School Board President  *(If Applicable)* |  | Signature of School Board President/BOCES President/Charter School Board President  *(If Applicable)* |
|  |  |  |
| Name of District Superintendent  *(If Applicable)* |  | Signature of District Superintendent  *(If Applicable)* |
|  |  |  |
| Name of Charter School Board President  *(if applicable)* |  | Signature of Charter School Board President  *(if applicable)* |
|  |  |  |
| Name of Charter School Institute Authorized Representative *(if applicable)* |  | Signature of Charter School Institute Authorized Representative *(if applicable)* |

|  |  |  |
| --- | --- | --- |
| Name of Title I Director  *(if applicable)* |  | Signature of Title I Director  *(if applicable)* |
|  |  |  |
| Name of Special Education Director  *(if applicable)* |  | Signature of Special Education Director  *(if applicable)* |

Colorado Department of Education (Federal Programs Unit, ESSU) Commitments:

* Work with principals in high achieving schools to make the best use of “what works” in order to implement best practices;
* Apply accountability through 1) the state’s policy infrastructure, 2) monitoring, 3) implementation requirements to secure continuation funding, and 4) evaluation of the initiative.
* Disseminate what works – both to help mentored sites succeed, and to share the work of sites with other districts and schools in the state.
* Provide quality training and technical assistance to build the capacity of mentored sites to develop and implement an effective Title I plan that addresses the needs for minority students, students experiencing poverty students with disabilities, and English Learners;
* Provide guidance around early intervening and coordinating services; and
* Meet with school regularly to provide support in implementation changes.