# Colorado Charter Schools Program Grant

# Appendix L: Technical Assistance Proposal (3-Year)

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| Charter School Name:  |
| Grant Contact Person, including phone and email:  |
| **Session Title/Event** | **Participation** | **Target Dates** | **Attendees** |
|  |  | *Please "X" the event you intend to attend. Where not provided, please indicate the scheduled or targeted date.* | *Please "X" the proposed attendees for each event.* |
| **Planning Year Sub-Grantee Activities** |
| **Sub-Grantee Support** |
| CCSP Grant and Application Training | Required | \_\_\_ Fall | \_\_\_ Founder(s) \_\_\_ Board member(s)\_\_\_ Administrator(s)\_\_\_ Business manager  |
| CCSP Grant Budget Workshop | Encouraged | \_\_\_ Fall\_\_\_ Winter | \_\_\_ Founder(s)\_\_\_ Board member(s)\_\_\_ Administrator(s)\_\_\_ Business manager |
| CCSP Grant Post-Award Webinar | Required | \_\_\_ Fall  | \_\_\_ School grant contact (required)\_\_\_ Founder(s) \_\_\_ Board member(s)\_\_\_ Administrator(s)\_\_\_ Business manager |
| **Governing Board Support** |
| CDE Charter School Board Training Modules | Required | Complete modules 1-6, 8-11, 14, 17, 18, 23, and 25 by date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Founder(s)\_\_\_ Board member(s) (required) |
| CDE Board Fundamentals | 1 Required | \_\_\_ Fall\_\_\_ Spring | \_\_\_ Board member(s) (required) \_\_\_ Administrator(s) |
| CDE Unified Improvement Plan Training *(training request form required)* | Encouraged | CDE Schools of Choice will communicate schedule | \_\_\_ Board member(s) \_\_\_ Administrator(s) |
| Data Dashboard with Academic, Culture, Financial and Operational Measures *(training request form required; see link* [*here*](https://bit.ly/2yZTGjV)) | Required | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s) (required)\_\_\_ Administrator(s) |
| Specialized Governing Board Training*(training request form required)* | Encouraged | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s) \_\_\_ Administrator(s) |
| Topic-based Webinars | \_\_\_ November\_\_\_ December\_\_\_ January\_\_\_ February\_\_\_ March\_\_\_ May | \_\_\_ Founder(s)\_\_\_ Board member(s) \_\_\_ Administrator(s) |

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| **Administrator Support** |
| Administrator Mentoring *(signed mentor log required)* | 8-10 hours Required  | \_\_\_ Mentor: \_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Administrator(s) |
| CDE School Administrator Mentoring Cohort (Professional Development) | 3 Required | \_\_\_ September\_\_\_ October\_\_\_ November\_\_\_ February\_\_\_ March\_\_\_ June | \_\_\_ Administrator(s) |
| Specialized Instructional Leadership Training *(training request form required)* | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s)\_\_\_ Administrator(s) (required)\_\_\_ Instructional staff |
| CDE Unified Improvement Plan Training*(training request form required)* | Encouraged | CDE Schools of Choice will communicate schedule | \_\_\_ Board member(s) \_\_\_ Administrator(s) |
| Topic-based Webinars | \_\_\_ November\_\_\_ December\_\_\_ January\_\_\_ February\_\_\_ March\_\_\_ May | \_\_\_ Founder(s) \_\_\_ Board member(s) \_\_\_ Administrator(s) |
| **Business Office Support** |
| CDE Regional Business Manager Network Meeting | 1 Required | \_\_\_ September \_\_\_ November \_\_\_ January \_\_\_ April | \_\_\_ Board member(s)\_\_\_ Administrator(s)\_\_\_ Business manager |
| Specialized Business Office Training *(training request form required)* | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s)\_\_\_ Administrator(s)\_\_\_ Business manager |
| **Year 1 Implementation Sub-Grantee Activities** |
| **Sub-Grantee Support** |
| CCSP Grant Renewal Proposal Webinar | Required | \_\_\_ Fall  | \_\_\_ School grant contact (required) \_\_\_ Founder(s) \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager |
| CCSP Implementation Grant Site Visit | Required | CDE Schools of Choice will schedule with school | \_\_\_ Founder(s) \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager  |
| **Governing Board Support** |
| CDE Charter School Board Training Modules | Required | Complete modules 7, 12, 13, 15, 16, 19-22, 24, and 26-30 by Date: \_\_\_\_\_\_\_\_\_ | \_\_\_ Founder(s)\_\_\_ Board member(s) (required) |
| CDE Unified Improvement Plan Training *(training request form required)* | Required | CDE Schools of Choice will communicate schedule | \_\_\_ Board member(s) (required) \_\_\_ Administrator(s) |
| Specialized Governing Board Training*(training request form required)* | Encouraged | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s) \_\_\_ Administrator(s) |
| Topic-based Webinars | \_\_\_ November\_\_\_ December\_\_\_ January\_\_\_ February\_\_\_ March\_\_\_ May | \_\_\_ Founder(s) \_\_\_ Board member(s) (required) \_\_\_ Administrator(s) |
| **Administrator Support** |
| Administrator Mentoring *(signed mentor log required)* | 32-40 hours required  | \_\_\_ Mentor: \_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Administrator(s) |
| CDE School Administrator Mentoring Cohort *(Professional Development)* | 3 required | \_\_\_ September \_\_\_ October \_\_\_ November \_\_\_ February \_\_\_ March\_\_\_ June | \_\_\_ Administrator(s) |
| Specialized Instructional Leadership Training *(training request form required)* | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s) \_\_\_ Administrator(s) (required) \_\_\_ Instructional staff |
| CDE Unified Improvement Plan Training *(training request form required)* | Required | CDE will communicate schedule | \_\_\_ Board member(s) \_\_\_ Administrator(s) (required)  |
| **Business Office Support** |
| CDE Annual Finance Seminar | Required | \_\_\_ Fall | \_\_\_ Founder(s)\_\_\_ Board member(s)\_\_\_ Administrator(s)\_\_\_ Business manager |
| CDE Individualized Business TA *(by appointment)* | Encouraged | \_\_\_Throughout year | \_\_\_Business manager |
| Business Operations Mentor *(mentor log and growth plan required; 4 hours = 1 credit)* | \_\_\_Ongoing | \_\_\_Business manager |
| Topic-based Webinars | \_\_\_ November\_\_\_ December\_\_\_ January\_\_\_ February\_\_\_ March\_\_\_ May | \_\_\_Administrator(s) \_\_\_Board member(s)\_\_\_Business manager |
| CDE Business Manager Network Meetings | 3 Required | \_\_\_ November \_\_\_ February \_\_\_ April | \_\_\_ Board member(s)\_\_\_ Administrator(s)\_\_\_ Business manager |
| Specialized Business Office Training *(training request form required)* | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s)\_\_\_ Administrator(s)\_\_\_ Business manager |
| **Year 2 Implementation Sub-Grantee Activities** |
| **Sub-grantee Support** |
| Charter School Support Initiative Webinar | Encouraged | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Founder(s) \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager  |
| Charter School Support Initiative Site Visit | Required | CSSI team lead will schedule with school | \_\_\_ Founder(s) \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager \_\_\_ Instructional staff |
| **Governing Board Support** |
| Board Self-Assessment *(training request form required)* | Required | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s) (required) \_\_\_ Administrator(s) |
| Strategic Planning Training *(training request form required)* | Required | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s) (required) \_\_\_ Administrator(s) |
| Topic-based Webinars | Encouraged | \_\_\_ November\_\_\_ December\_\_\_ January\_\_\_ February\_\_\_ March\_\_\_ May | \_\_\_ Board member(s) (required) \_\_\_ Administrator(s) |
| Specialized Governing Board Training*(training request form required)* | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s) \_\_\_ Administrator(s) |
| **Administrator Support** |
| Administrator Mentoring *(signed mentor log required)* | 20-25 hours required | \_\_\_ Mentor: \_\_\_\_\_\_\_\_\_\_ | \_\_\_ Administrator(s) |
| CDE School Administrator Mentoring Cohort | 4 required | \_\_\_ September \_\_\_ October \_\_\_ November \_\_\_ February \_\_\_ March\_\_\_ June | \_\_\_ Administrator(s) |
| Specialized Instructional Leadership Training *(training request form required)* | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s) \_\_\_ Administrator(s) (required) \_\_\_ Business manager \_\_\_ Instructional staff  |
| **Business Office Support** |
| CDE Annual Finance Seminar | Required | \_\_\_ Fall | \_\_\_ Founder(s) \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager  |
| CDE Individualized Business TA *(by appointment)* | Encouraged | \_\_\_Throughout year | \_\_\_Business manager |
| Business Operations Mentor*(mentor log and growth plan required; 4 hours = 1 credit)* | \_\_\_Ongoing | \_\_\_Business manager |
| CDE Business Manager Network Meetings | 3 Required | \_\_\_ November \_\_\_ February \_\_\_ April | \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager |
| Specialized Business Office Training *(training request form required)* | \_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager |
| **Other Support Options – All Years** |
| Equity Convening(s) | Encouraged | \_\_\_September\_\_\_TBA | \_\_\_ Instructional staff \_\_\_ Founder(s) \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager |
| Colorado or National Charter School Conference Breakout Sessions*(training request form may be required)* | \_\_\_ March\_\_\_ June | \_\_\_Instructional staff \_\_\_ Founder(s) \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager |
| CDE Western Slope Seminar | \_\_\_April | \_\_\_ Board member(s) \_\_\_ Administrator(s) \_\_\_ Business manager |