



APPLICATION FOR PARTICIPATION

State-Aided Educational Institutions (SAI) FY 2024

Maryland State Department of Education

200 West Baltimore Street
Baltimore, Maryland 21201

Deadline

Friday, June 3, 2022
No later than 4:00 p.m. EST

MARYLAND STATE DEPARTMENT OF EDUCATION

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State Superintendent of Schools
Secretary-Treasurer, Maryland State Board of Education

Justin Dayhoff

Assistant Superintendent of Financial Planning,
Operations, and Strategy

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Instructions

Complete the application electronically typing directly into the fillable fields and charts. Do not alter or remove sections. When finished, save the application document as a pdf, print the document, and obtain appropriate signatures. Be sure to include all required attachments.

Required application components for SAI program include:

1. Completion of the SAI Application (FY 2024)
2. Submission of all required Attachments, and
3. Signed Grant Recipient Assurances.

Email one complete application packet to:

sai.applications@maryland.gov

Mail one complete application packet to:

Maryland State Department of Education
Office of Grants Administration and Compliance
200 W. Baltimore Street
Baltimore, Maryland 21201
Attention: Michial A. Gill, Ph.D.

Note: The Grant Information Guide (GIG) and the FY 2024 Application are posted on the [SAI webpage](#).

A. APPLICATION COVER SHEET

Type of Applicant: Current SAI New SAI Application

Name of Institution: Click or tap here to enter text.

Name of Primary Contact: Click or tap here to enter text.

Phone Number: Click here to enter number

Email Address: Click here to enter text.

Mailing Address: Click or tap here to enter text.

FY24 Funding Request:

FY 2023 – 2024 Baseline Amount: \$ Click here to enter amount. (Use FY2023 Governor’s Appropriation)

FY 2023 – 2024 Augmentation Amount Requested: \$ Click here to enter amount. (If requested)

Program Assurances:

Eligible applicants should be able to respond “Yes” to all items below.

Select response The institution is governed by an Independent Board.

Select response The Institution is a non-profit organization (501(c)(3)).

Select response The Institution has an annual independent audit or internally generated financial statements.

Select response More than 50% of the Institution’s operating budget is from other than State grants.

Select response The Institution provides a direct service to Maryland school groups and/or provides a direct service to individuals with disabilities.

Select response The Institution serves multiple Maryland jurisdictions.

Select response The educational program for which funding is sought is not a new program and can show a track record of success.

Select response Educational programs are aligned with curricular and educational priorities of the State.

Attestation:

The signature below attests to the fact that as an authorized representative of the above-mentioned organization, certifies that all eligibility criteria above are met.

Signature of Executive Director or Agency Head

Date

B. EDUCATIONAL PROGRAMMING

1. Describe the mission of the Institution and the educational enrichment program(s) to be funded. Provide a summary using the guidance on page 6 of the GIG. All text should be 1.5 line spacing and a Times New Roman type size of 12-point font (text box is pre-formatted).

Click or tap here to enter text.

2. What major improvements are expected in FY 2024 (Report FY 2022 up to the present time)?

Click or tap here to enter text.

3. Indicate the learning level(s) of the SAI educational program:

- Early Childhood (3-5 years of age)
 Elementary School (grades 1-5)
 Middle School (grades 6-8)
 High School (grades 9-12)
 Other *(explain)

4. Describe the program’s area(s) of educational focus (e.g., science, mathematics, technology, reading and language arts, social sciences, fine arts, and/or career life skills development.). How are they aligned with the Maryland College and Career Readiness Standards, Next Generation Science Standards, Fine Arts Standards, and/or other Maryland educational priorities?

Click or tap here to enter text.

5. Identify the program’s outcomes that pertain to the funded education program activities. These outcomes measure the value-added learning students receive as a result of these experiences (1-3 outcomes). The institution will evaluate and report these outcomes in the Annual Outcomes Report. (Guidance: What knowledge/skills, etc. are students expected to gain from participation in the experience? What measure(s) are used for evaluation?) Define/emphasize data driven success criteria.

Activity #1: Click or tap here to enter text.

Outcome: Click or tap here to enter text.

Activity #2: Click or tap here to enter text.

Outcome: Click or tap here to enter text.

Activity #3: Click or tap here to enter text.

Outcome: Click or tap here to enter text.

C. PROGRAM SERVICE IMPACT AND DELIVERY

1. Why is the Institution seeking State funding for this educational initiative? Describe the impact of receiving this funding?

Click or tap here to enter text.

2. **SAI Service Delivery Numbers:** Current SAI include the numbers served under Baseline funding and projected Augmentation funding. New applicants should only complete the FY 2024 Estimated column.

	FY 2021 Baseline Actual	FY 2022 Baseline Estimated	FY 2023 Baseline Estimated	FY 2024 Baseline Estimated	FY 2024 Augmentation Requested
Students	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Students w/ Disability	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Teachers	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Chaperones/ others	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Total	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Number of LEA	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Number of Title I Schools	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.

- Indicate the number of students/teachers/chaperones served in each local jurisdiction and public or non-public school for FY 2021. New applicants should complete this table using service numbers with institutional funds.

Public Schools (including Charter Schools)				
LEA Name	Teachers	Students	Chaperones	Total
Select LEA / County/City	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Select LEA / County/City	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Select LEA / County/City	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Select LEA / County/City	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.

**Add more rows if necessary*

Non-Public Schools (private, parochial, and home schools.)				
LEA Name	Teachers	Students	Chaperones	Total
Select LEA / County/City	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Select LEA / County/City	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Select LEA / County/City	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.
Select LEA / County/City	Click here to enter number.	Click here to enter number.	Click here to enter number.	Click here to enter number.

**Add more rows if necessary*

D. BUDGET AND BUDGET NARRATIVE

State-Aided Educational Institutions (SAI) Current Operating Budget - FY 2024

Delineate the budget categories and show how SAI funds were allocated across the Institution’s budget categories in the FY 2024 operating budget. Include all sources of Income. Each line item should be totaled with the Grand Total at the bottom.

Budget Category	Income	Expenditures	Institution	SAI Grant	TOTAL by category
Grand Total	enter number.	enter number.	enter number.	enter number.	enter number.

**Add more rows if necessary*

Provide a budget and budget narrative for the educational initiative for which funds are sought. The budget narrative should detail how these funds are spent to support the educational program.

1. Salaries and Wages

Click or tap here to enter text.

2. Contracted Services

Click or tap here to enter text.

3. Supplies and Materials

Click or tap here to enter text.

4. Other Charges

Click or tap here to enter text.

State Grants Received in FY 2022 and FY 2023:

List all State grants received, and the year received. Include funds received from MSDE as well as other State agencies.

Grant Name/Funding Source	Funding Year	Funding Amount
SAI / MSDE	Year: 2022	\$ Click here to enter amount
SAI / MSDE	Year: 2023	\$ Click here to enter amount
Click here to enter text.	Year: enter year	\$ Click here to enter amount
Click here to enter text.	Year: enter year	\$ Click here to enter amount
Click here to enter text.	Year: enter year	\$ Click here to enter amount

**Add more rows if necessary*

E. REQUIRED ATTACHMENTS

A complete application includes the following required attachments:

- ◆ Attachment A: On organizational letterhead, provide a list of names of members of the Board of Trustees and specific representation/position (jurisdiction or whom they represent).
- ◆ Attachment B: Proof of status as a non-profit organization (501(c)(3) certification).
- ◆ Attachment C: Current Certificate of Liability Insurance Coverage.
- ◆ Attachment D: Copy of the most recent independent audit.