

Appendix A: Behavior Health Grant FY 2024 Application

Required for all LEAs

Proposal Cover Page

Institution/Agency/Jurisdiction Name: Click or tap here to enter text.

Project Title: Click or tap here to enter text.

Date of Submission: Click or tap here to enter text.

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

Institution/Agency Address: Click or tap here to enter text.

Contact Person Phone: Click or tap here to enter text.

Contact Person Email: Click or tap here to enter text.

Amount of the request for grant period (July 1, 2023 – June 30, 2024): \$29,000

(Should agree with Proposed Budget and not to exceed \$29,000)

Signature of Behavioral Health Coordinator or Director of Student Services Supervisor

Date

Signature of Superintendent of Schools

Date

Please Check One:

LEA does not intend to use these grant funds

Application is completed and submitted

Project Proposal

Project Proposal Refer to the page 6 of the information document for guidance.	
Project Description:	Select from the Use of Funds list on page 5 of the information document. Include the item here along with a brief description.
Extent of Need:	Click or tap here to enter text.
Goals:	Click or tap here to enter text.
Measurable Outcomes:	Click or tap here to enter text.
Strategies:	Click or tap here to enter text.
Evidence of Impact:	Click or tap here to enter text.

Application Budget

Personnel and Wages			
Line Item	Calculation	Requested	Total
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Contracted Services			
Line Item	Calculation	Requested	Total
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Total Contracted Services			Click or tap here to enter text.

Supplies & Materials			
Line Item	Calculation	Requested	Total
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Total Supplies & Materials			Click or tap here to enter text.

Other Charges			
Line Item	Calculation	Requested	Total
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Total Other Charges			Click or tap here to enter text.

Equipment			
Line Item	Calculation	Requested	Total
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Total Equipment			Click or tap here to enter text.
Total Requested			Click or tap here to enter text.

Add additional rows, where needed.

<p>Additional Funds</p> <p>Additional funds may be available if all funding is not exhausted.</p> <p>Please include project information and amount</p>	<p>Click or tap here to enter text.</p>
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BUDGET NARRATIVE

The budget narrative must describe a clear relationship between the activities described in the application and the proposed allocation of grant funds. The budget narrative must also address the necessity and rationale of proposed costs.

Click or tap here to enter text.