

North Carolina Title I, Part D Application – 2009-2010 Subpart 1 – State Agencies

State Agency		CODE		Two copies of the completed application should be received by June 26, 2009. Mail to: NCDPI Program Monitoring Section MSC # 6351 Raleigh, NC 27699
Title I Director		Address 1		
Phone		Address 2		
FAX		City		
Email		State ZIP		

CERTIFICATION

The applicant designated above hereby applies for a grant of federal funds to provide instructional activities and services to meet the special educational needs of educationally deprived children as set forth in this application. I HEREBY CERTIFY that to the best of my knowledge, the information contained in this application is correct; the agency named above authorized me as its representative to file this application; and such action is recorded in the minutes of the agency's meeting held on _____. (Month/Day/Year)

STATEMENT OF ASSURANCES

Assurances are hereby provided to the State educational agency (SEA) that the State agency will:

- comply with the supplement, not supplant requirement of section 1120A and consistent with section 1415(b).
- in making services available to children and youth in adult correctional institutions) give priority to such children and youth who are likely to complete incarceration within a 2-year period.
- assist in locating alternative programs through which students can continue their education if the students are not returning to school after leaving the correctional facility or institution for neglected or delinquent children and youth.
- work with parents to secure parents' assistance in improving the educational achievement of their children and youth, and preventing their children's and youth's further involvement in delinquent activities.
- work with children and youth with disabilities in order to meet an existing individualized education program.
- notify the child's or youth's local school if the child or youth –
 - is identified as in need of special education services while the child or youth is in the correctional facility or institution for neglected or delinquent children and youth; and
 - intends to return to the local school.
- work with children and youth who dropped out of school before entering the correctional facility or institution for neglected or delinquent children and youth to encourage the children and youth to reenter school once the term of the incarceration is completed or provide the child or youth with the skills necessary to gain employment, continue the education of the child or youth, or achieve a secondary school diploma or its recognized equivalent if the child or youth does not intend to return to school.
- train teachers and other qualified staff to work with children and youth with disabilities and other students with special needs taking into consideration the unique needs of such students.
- coordinate this program with any programs operated under the Juvenile and Delinquency Prevention Act of 1974 (42 U.S.C. 5601 et seq.) or other comparable programs, if applicable.
- designate an individual in each affected correctional facility or institution for the neglected or delinquent children and youth to be responsible for issues relating to the transition of children and youth from such facility or institution to locally operated programs
- reserve not less than 15 percent and not more than 30 percent of funds under this part for transition services consistent with section 1418.
- be responsible for repayment of Title I funds in the event of an audit exception.

State Agency Authority Name

State Agency Authority Signature

Date

STATE DEPARTMENT USE ONLY

Project Number: _____

Program Approval Date: _____ Signature: _____

(ESEA, TITLE I PROGRAM COORDINATOR)

STATE APPLICATION

North Carolina Department of Public Instruction

Debarment Certification

This certification is required by the regulations implementing Executive Order 12549, debarment and suspension, 34 CFR Part 85, section 85.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1998 *Federal Register* (pages 160-192). Copies of the regulations may be obtained by contacting the person to which this proposal is submitted.

Before Completing Certification, Read Instructions

- (1) The prospective lower tier participants, certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective lower tier participants are unable to certify to any of the statements in this certification, such prospective participants shall attach an explanation to this proposal.

Debarment Certification

- 1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.
- 2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into, if it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or changed circumstances.
- 3. The prospective lower tier participants shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- 4. The terms "covered transaction," "debarment," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntary excluded," as used in this clause have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.
- 5. The proposed lower tier participants agrees by submitting this proposal that should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
- 6. The prospective lower tier participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion-Lower Covered Transactions," without modification on all lower tier covered transactions and in all solicitations for all solicitations for lower tier covered transactions.
- 7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
- 8. Nothing contained in the foregoing shall be construed to require establishment of system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 9. Except for transactions authorized under number 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department of agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Name and Title of Authorized Representative

Signature of Authorized Representative

Date

NEEDS ASSESSMENT

Indicate what factors will be used to determine at-risk status as reflected in the chart below.

Institution Name	Enrollment	Reading			Math			*Support Area			**Other		
		# Assessed	# At-Risk	%	# Assessed	# At-Risk	%	# Assessed	# At-Risk	%	# Assessed	# At-Risk	%
1.													
2.													
3.													
4.													
5.													
6.													
7.													
8.													
9.													
10.													
11.													
12.													
13.													

*Indicate Support Area _____

**Indicate Other _____

NEEDS BY PRIORITY

Based on a needs assessment study, rank the needs in priority order and indicate which needs will be served. If needs to be addressed differ from summary above, attach an explanation.

Rank	Need	To Be Addressed?	
		Yes	No
1		<input type="checkbox"/>	<input type="checkbox"/>
2		<input type="checkbox"/>	<input type="checkbox"/>
3		<input type="checkbox"/>	<input type="checkbox"/>
4		<input type="checkbox"/>	<input type="checkbox"/>

SELECTION OF PARTICIPANTS:

Please state the criteria for eligibility and describe the selection procedure:

Will an instructional plan be developed for each participant? Yes No

TYPE OF INSTITUTIONALIZED CHILDREN TO BE SERVED:

- Children under 21 years of age in institutions for adults.
- Children in institutions for delinquent.

MAINTENANCE OF EFFORT:

(2nd Preceding Year)
\$ _____

(1st Preceding Year)
\$ _____

INSTRUCTIONAL NEEDS AND SERVICES AT IDENTIFIED SCHOOLS (Instructions for Completion)

Column 1	List all facilities/schools eligible to receive Title I services.
Column 2	Indicate the number of students in each facility/school.
Column 3	Indicate the number of children who are eligible for Title I services in Reading, if applicable.
Column 4	Indicate the number of children eligible for Title I services in Math, if applicable.
Column 5	If you will address an instructional area other than Reading or Math, indicate the number of children eligible in that instructional area. Note: At the bottom of the table, please indicate the name of the instructional area.
Column 6	Indicate the number of FTE teaching positions (in Reading) that will be paid with Title I funds, if applicable.
Column 7	Indicate the number of FTE teaching positions (in Math) that will be paid with Title I funds, if applicable.
Column 8	If you will address an instructional area other than Reading or Math, indicate the number of FTE teaching positions in that instructional area, if applicable.
Column 9	Indicate the number of FTE paraprofessional positions (in Reading) that will be paid with Title I funds, if applicable.
Column 10	Indicate the number of FTE paraprofessional positions (in Math) that will be paid with Title I funds, if applicable.
Column 11	If you will address an instructional area other than Reading or Math, indicate the number of FTE paraprofessional positions in that instructional area, if applicable.
Column 12	Indicate the approximate number of children that will participate in the Reading project, if applicable.
Column 13	Indicate the approximate number of children that will participate in the Math project, if applicable.
Column 14	Indicate the approximate number of children that will participate in the "Other" instructional project, if applicable.
Column 15	PROJECT SETTING. Indicate the instructional model(s) to be used at each participating facility/school. Use the following abbreviations:

PO = The pull-out setting involves pulling students from the regular classroom on a limited basis (25% of the regular instructional time).

IC = The in-class model involves the use of resource teachers (Title I teachers) and/or other resources in the regular classroom. *The in-class support that has been most effective does not resemble a pull-out in the back of the classroom.*

AO = The add-on/extended learning model involves providing Title I services at times other than the regular instructional day (before school, after school or summer school). Note: Title I statute strongly encourages the use of this model.

SEC = A scheduled elective program is one in which participating students receive Title I instructional services during an elective period.

PR = A paired model is described as follows: Homogeneously-grouped students (in reading and/or math) are assigned to a regular class taught by a State or locally paid teacher. The class is balanced with the enrollment equal and not exceeding any of the non-paired classes. A title I paid teacher is then paired with a regular education teacher to teach one or more reading and/or math classes composed entirely of eligible Title I students. All scheduling for this option should be reviewed and approved by the Title I Director to ensure compliance with equitable distribution of State and local funds. The regular classroom teacher will operate during the reading and/or math period as a title I teacher. A distinct, particularly designed Title I program to meet the special educational needs of the participants should be implemented.

Date of Data Collection Indicate the date that data was collected.

Source of Data Collection Indicate the source of the data provided.

SUPPORT SERVICE PROJECT DESCRIPTION
(Other than parent involvement project)

TYPE OF PROJECT: _____

FACILITIES/SCHOOLS SERVED:

ESTIMATED NUMBER OF PARTICIPANTS _____

STATEMENT OF NEED Describe needs and the basis for determining those needs.

OBJECTIVES

SELECTION OF PARTICIPANTS How will participants be selected for this project?

NARRATIVE

EVALUATION

Describe the instructional program, pupil services and procedures that will be used.

Student Progress

Describe the measures and procedures that will be used to assess student progress.

Inclusion of Stakeholders

Describe how the agency has planned and will implement and evaluate the institution-wide project in consultation with appropriate stakeholders.

Professional Development

Describe the professional development to be provided to enable teachers and personnel to carry out the project effectively by completing the table on the following page.

CHANGES TO BUDGETED POSITIONS

ACCOUNT CODE	Number of Positions			POSITION DESCRIPTION	Percent Assigned To Project	Number of Months Assigned To Project	BUDGETED DOLLARS
	Old	Increase (Decrease)	Revised				

Submitted by: _____

Signature of LEA Superintendent or Finance Officer

Date

FOR STATE AGENCY USE ONLY		
Request Processed (Circle One):	Yes	No
_____ Signature of Federal Grant Administrator	_____ Date	

Please submit this amendment and all attachments directly to the Federal Programs Section.

