

**Judy Center Grant Program FY23**

**Updated Version as of 4/4/22**

**Maryland State Department of Education**200 West Baltimore Street

Baltimore, Maryland 21211

**Deadline**May 16, 2022

No later than 5:00 pm EST

**GRANT APPLICATION**

**MARYLAND STATE DEPARTMENT OF EDUCATION**





**Mohammed Choudhury**State Superintendent of Schools   
Secretary-Treasurer, Maryland State Board of Education

**Deann M. Collins, Ed D.**Deputy Superintendent, Teaching and learning

**Steven Hicks**Assistant State Superintendent, Division of Early Childhood

**Larry Hogan**Governor



**MARYLAND STATE BOARD OF EDUCATION**

**Clarence C. Crawford**President, Maryland State Board of Education

Charles R. Dashiell, Jr., Esq. (Vice President)

Shawn D. Bartley, Esq.

Gail Bates

Chuen-Chin Bianca Chang

Susan J. Getty, Ed.D.

Vermelle Greene, Ph.D.

Jean C. Halle

Dr. Joan Mele-McCarthy

Rachel L. McCusker

Lori Morrow

Brigadier General Warner I. Sumpter (Ret.)

Holly C. Wilcox, Ph.D.

Kevin Bokoum (Student Member)

Table of Contents

[Proposal Cover Page 4](#_Toc99990168)

[Project Summary 5](#_Toc99990169)

[Projected Enrollment and Growth by Program 5](#_Toc99990170)

[Implementation Plan 6](#_Toc99990171)

[Implementation Plan Part A: Population-Level Result 6](#_Toc99990172)

[Implementation Plan Section B: Program-Level Accountability (Performance Measures) 7](#_Toc99990173)

[Performance Measure 1: Family Engagement Component 7](#_Toc99990174)

[Performance Measure 2: Professional Development Component 9](#_Toc99990175)

[Performance Measure 3: Case Management Component 11](#_Toc99990176)

[Performance Measure 4: All Components 13](#_Toc99990177)

[Performance Measure 5: “How Much” or “How Well” 15](#_Toc99990178)

[Performance Measure 6: “Better Off” 17](#_Toc99990179)

[Budget (year 1) 19](#_Toc99990180)

[1. Salaries & wages 19](#_Toc99990181)

[2. Fringe Benefits 19](#_Toc99990182)

[3. Travel 20](#_Toc99990183)

[4. Supplies & Materials 20](#_Toc99990184)

[5. Contractual Services 21](#_Toc99990185)

[6. Other 21](#_Toc99990186)

[7. Indirect Costs 21](#_Toc99990187)

[Budget (year 2) 22](#_Toc99990188)

[1. Salaries & wages 22](#_Toc99990189)

[2. Fringe Benefits 22](#_Toc99990190)

[3. Travel 23](#_Toc99990191)

[4. Supplies & Materials 23](#_Toc99990192)

[5. Contractual Services 23](#_Toc99990193)

[6. Other 24](#_Toc99990194)

[7. Indirect Costs 24](#_Toc99990195)

[Budget (year 3) 25](#_Toc99990196)

[1. Salaries & wages 25](#_Toc99990197)

[2. Fringe Benefits 25](#_Toc99990198)

[3. Travel 26](#_Toc99990199)

[4. Supplies & Materials 26](#_Toc99990200)

[5. Contractual Services 26](#_Toc99990201)

[6. Other 27](#_Toc99990202)

[7. Indirect Costs 27](#_Toc99990203)

[Appendix 28](#_Toc99990204)

# Proposal Cover Page

Local Education Agency: Choose an item.

Name of Judy Center: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Judy Center: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of contact person (if different from above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total amount requested: $990,000 ($330,000 per year)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name, Superintendent / Head of Local Education Agency

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature, Superintendent /Head of Local Education Agency Date

# Project Summary

Briefly describe how the grant funds will be used to serve the families and partners in your community in order to continuously promote school readiness and strengthen families. Be sure to include how you will equitably serve all children, especially considering the lingering effects of the pandemic. Response must be 1,000 words or less (submissions exceeding this limit will lose points during the scoring process). Refer to the Grant Information Guide for further guidance on this section.

|  |
| --- |
| Type response here. |

# Projected Enrollment and Growth by Program

Complete the chart below with the projected enrollment and growth by program. Age of the child should be determined the same way the school system determines school eligibility whereas, the age of a child is based on their age on or before September 1. Only children in the Judy Center catchment area should be included. Children counted include those enrolled in public school, private licensed childcare programs, or not enrolled in formal care (i.e., residing with family and friends at home). Refer to the Grant Information Guide for further guidance on this section.

**Projected Number of Children Enrolled**

|  |  |  |  |
| --- | --- | --- | --- |
| **Age** | **Year 1  (July 1, 2022 - June 30, 2023)** | **Year 2  (July 1, 2023 - June 30, 2024)** | **Year 3 (July 1, 2024 - June 30, 2025)** |
| Prenatal/Birth to 1-year olds |  |  |  |
| 2-year-olds |  |  |  |
| 3-year-olds, not enrolled in prekindergarten |  |  |  |
| 3-year-olds, enrolled in prekindergarten |  |  |  |
| 4-year-olds, not enrolled in prekindergarten |  |  |  |
| 4-year-olds, enrolled in prekindergarten |  |  |  |
| 5-year-olds, not enrolled in kindergarten |  |  |  |
| 5-year-olds, enrolled in kindergarten |  |  |  |
| **Total:** |  |  |  |

# Implementation Plan

## Implementation Plan Part A: Population-Level Result

All Judy Centers work toward our main result of “All Children in Maryland Enter School Ready to Learn.” We use the Kindergarten Readiness Assessment (KRA) data to help us understand the achievement of this result.

Using the last three years of KRA data, create a chart including a trend line that shows the percentage of children in your catchment area demonstrating readiness for kindergarten. [Download the template here](https://earlychildhood.marylandpublicschools.org/system/files/filedepot/3/kra_data_chart.xlsx) and follow the instructions to insert the chart into this application. Refer to the Grant Information Guide for further guidance on this section.

[insert a picture of your chart here]

1. How will the Judy Center work toward improving the KRA-measured readiness rate in the catchment area? Please provide broad strategies that would help address this indicator. (No more than 1000 words.)

|  |
| --- |
| Type response here. |

2. What is the target percent of students demonstrating readiness in your catchment area that you hope to see in the next three years? The target should be ambitious, yet attainable by the end of the grant period. Fill in the blank below.

By June 30, 2025, \_\_\_\_\_\_\_\_\_\_\_ % of children in the Judy Center catchment area will demonstrate readiness for kindergarten on the KRA assessment.

## Implementation Plan Section B: Program-Level Accountability (Performance Measures)

In order to successfully meet the goals of the Judy Center program, [12 Component Standards](https://earlychildhood.marylandpublicschools.org/families/judy-centers/component-standards) have been developed to outline all of the programmatic responsibilities required of a Judy Center. Each of the 12 Component Standards contain multiple sub requirements in order to achieve the standard as a whole. Refer to the Grant Information Guide for further guidance on this section.

### Performance Measure 1: Family Engagement Component

|  |  |  |  |
| --- | --- | --- | --- |
| **Related Component Standard** | **Type of Performance Measure** | | **Performance Measure** |
| Component 5: Family Engagement | How much | Average number of engagements a child/family participates in a Judy Center event or offering | |

1. How will this performance measure be tracked? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. How are you doing on this performance measure?Is this performance measure heading in the right direction? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your target for the measure this year? The target should be ambitious, yet attainable. (Only provide the number/percent below.)

|  |
| --- |
| Type response here. |

1. What is the story behind this performance measure? What are the positive, negative, and anticipated factors that are playing a role in the data? If there are factors you think may be playing a role but are not sure and need to develop your understanding, please note that as well. (No more than 200 words)

|  |
| --- |
| Type response here. |

1. Who are partners that have a role to play? Provide a list of partners (including organizations or people that may not be members of the Judy Center Partnership) who could help you with addressing the factors listed above to improve on this specific performance measure. (Do not list all available partners; only partners who can help with this specific performance measure.)

|  |
| --- |
| Type response here. |

1. What would work to turn the curve/improve this performance measure? What are the strategies you think will best address the factors affecting the data listed above? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your Action Plan to turn the curve/improve this performance measure? From the ideas in the previous question (what would work), which idea(s) will you put into action? What steps do you plan to take to improve this performance measure? Consider who will be responsible for taking action on each step and by when this step should occur. Focus on how you will improve upon actions previously taken to address this performance measure or new actions that you think will help.

For ongoing or recurring action steps, please write the frequency of occurrence (do not write specific dates). Answers must be entered into the table below; do not insert any additional rows in the table. This action plan should cover no more than a one-year period.

|  |  |  |
| --- | --- | --- |
| **Action Step** | **Who** | **When** |
|  |  |  |
|  |  |  |
|  |  |  |

### Performance Measure 2: Professional Development Component

|  |  |  |
| --- | --- | --- |
| **Related Component Standard** | **Type of Performance Measure** | **Performance Measure** |
| Component 9: Professional Development | How much | Number of professional development opportunities offered to partners and friends of the Judy Center |

1. How will this performance measure be tracked? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. How are you doing on this performance measure?Is this performance measure heading in the right direction? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your target for the measure this year? The target should be ambitious, yet attainable. (Only provide the number/percent below.)

|  |
| --- |
| Type response here. |

1. What is the story behind this performance measure? What are the positive, negative, and anticipated factors that are playing a role in the data? If there are factors you think may be playing a role but are not sure and need to develop your understanding, please note that as well. (No more than 200 words)

|  |
| --- |
| Type response here. |

1. Who are partners that have a role to play? Provide a list of partners (including organizations or people that may not be members of the Judy Center Partnership) who could help you with addressing the factors listed above to improve on this specific performance measure. (Do not list all available partners; only partners who can help with this specific performance measure.)

|  |
| --- |
| Type response here. |

1. What would work to turn the curve/improve this performance measure? What are the strategies you think will best address the factors affecting the data listed above? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your Action Plan to turn the curve/improve this performance measure? From the ideas in the previous question (what would work), which idea(s) will you put into action? What steps do you plan to take to improve this performance measure? Consider who will be responsible for taking action on each step and by when this step should occur. Focus on how you will improve upon actions previously taken to address this performance measure or new actions that you think will help.

For ongoing or recurring action steps, please write the frequency of occurrence (do not write specific dates). Answers must be entered into the table below; do not insert any additional rows in the table. This action plan should cover no more than a one-year period.

|  |  |  |
| --- | --- | --- |
| **Action Step** | **Who** | **When** |
|  |  |  |
|  |  |  |
|  |  |  |

### Performance Measure 3: Case Management Component

|  |  |  |
| --- | --- | --- |
| **Related Component Standard** | **Type of Performance Measure** | **Performance Measure** |
| Component 3: Case Management | How well | Percent of families achieving case management goals |

1. How will this performance measure be tracked? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. How are you doing on this performance measure?Is this performance measure heading in the right direction? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your target for the measure this year? The target should be ambitious, yet attainable. (Only provide the number/percent below.)

|  |
| --- |
| Type response here. |

1. What is the story behind this performance measure? What are the positive, negative, and anticipated factors that are playing a role in the data? If there are factors you think may be playing a role but are not sure and need to develop your understanding, please note that as well. (No more than 200 words)

|  |
| --- |
| Type response here. |

1. Who are partners that have a role to play? Provide a list of partners (including organizations or people that may not be members of the Judy Center Partnership) who could help you with addressing the factors listed above to improve on this specific performance measure. (Do not list all available partners; only partners who can help with this specific performance measure.)

|  |
| --- |
| Type response here. |

1. What would work to turn the curve/improve this performance measure? What are the strategies you think will best address the factors affecting the data listed above? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your Action Plan to turn the curve/improve this performance measure? From the ideas in the previous question (what would work), which idea(s) will you put into action? What steps do you plan to take to improve this performance measure? Consider who will be responsible for taking action on each step and by when this step should occur. Focus on how you will improve upon actions previously taken to address this performance measure or new actions that you think will help.

For ongoing or recurring action steps, please write the frequency of occurrence (do not write specific dates). Answers must be entered into the table below; do not insert any additional rows in the table. This action plan should cover no more than a one-year period.

|  |  |  |
| --- | --- | --- |
| **Action Step** | **Who** | **When** |
|  |  |  |
|  |  |  |
|  |  |  |

### Performance Measure 4: All Components

|  |  |  |
| --- | --- | --- |
| **Related Component Standard** | **Type of Performance Measure** | **Performance Measure** |
| This measure relates to all components. | Better Off | Percent of children who engaged with the Judy Center for at least one year who demonstrate readiness on the KRA |

1. How will this performance measure be tracked? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. How are you doing on this performance measure?Is this performance measure heading in the right direction? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your target for the measure this year? The target should be ambitious, yet attainable. (Only provide the number/percent below.)

|  |
| --- |
| Type response here. |

1. What is the story behind this performance measure? What are the positive, negative, and anticipated factors that are playing a role in the data? If there are factors you think may be playing a role but are not sure and need to develop your understanding, please note that as well. (No more than 200 words)

|  |
| --- |
| Type response here. |

1. Who are partners that have a role to play? Provide a list of partners (including organizations or people that may not be members of the Judy Center Partnership) who could help you with addressing the factors listed above to improve on this specific performance measure. (Do not list all available partners; only partners who can help with this specific performance measure.)

|  |
| --- |
| Type response here. |

1. What would work to turn the curve/improve this performance measure? What are the strategies you think will best address the factors affecting the data listed above? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your Action Plan to turn the curve/improve this performance measure? From the ideas in the previous question (what would work), which idea(s) will you put into action? What steps do you plan to take to improve this performance measure? Consider who will be responsible for taking action on each step and by when this step should occur. Focus on how you will improve upon actions previously taken to address this performance measure or new actions that you think will help.

For ongoing or recurring action steps, please write the frequency of occurrence (do not write specific dates). Answers must be entered into the table below; do not insert any additional rows in the table. This action plan should cover no more than a one-year period.

|  |  |  |
| --- | --- | --- |
| **Action Step** | **Who** | **When** |
|  |  |  |
|  |  |  |
|  |  |  |

### Performance Measure 5: “How Much” or “How Well”

Choose one measure from the list below. Delete the measures from the chart that you didn’t choose.

|  |  |  |
| --- | --- | --- |
| **Related Component Standard** | **Type of Performance Measure** | **Performance Measure** |
| Component 10:  Adult Education and Career Services | How much | Percent of families enrolling in adult education courses |
| Component 12: Partnerships | How much | Number of partner events, enhancement activities with the school, and outreach programs Judy Center staff attend |
| Component 3: Case Management | How much | Number of referrals made to community partners/organizations |
| Component 3: Case Management | How well | Percent of families who make connections/engage with referrals |
| Component 10:  Adult Education and Career Services | How well | Percent of families completing adult education courses |

1. How will this performance measure be tracked? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. How are you doing on this performance measure?Is this performance measure heading in the right direction? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your target for the measure this year? The target should be ambitious, yet attainable. (Only provide the number/percent below.)

|  |
| --- |
| Type response here. |

1. What is the story behind this performance measure? What are the positive, negative, and anticipated factors that are playing a role in the data? If there are factors you think may be playing a role but are not sure and need to develop your understanding, please note that as well. (No more than 200 words)

|  |
| --- |
| Type response here. |

1. Who are partners that have a role to play? Provide a list of partners (including organizations or people that may not be members of the Judy Center Partnership) who could help you with addressing the factors listed above to improve on this specific performance measure. (Do not list all available partners- only partners who can help with this specific performance measure.)

|  |
| --- |
| Type response here. |

1. What would work to turn the curve/improve this performance measure? What are the strategies you think will best address the factors affecting the data listed above? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your Action Plan to turn the curve/improve this performance measure? From the ideas in the previous question (what would work), which idea(s) will you put into action? What steps do you plan to take to improve this performance measure? Consider who will be responsible for taking action on each step and by when this step should occur. Focus on how you will improve upon actions previously taken to address this performance measure or new actions that you think will help.

For ongoing or recurring action steps, please write the frequency of occurrence (do not write specific dates). Answers must be entered into the table below; do not insert any additional rows in the table. This action plan should cover no more than a one-year period.

|  |  |  |
| --- | --- | --- |
| **Action Step** | **Who** | **When** |
|  |  |  |
|  |  |  |
|  |  |  |

### Performance Measure 6: “Better Off”

Choose one measure from the list below. Delete the measures from the chart that you didn’t choose.

|  |  |  |
| --- | --- | --- |
| **Related Component Standard** | **Type of Performance Measure** | **Performance Measure** |
| Component 12: Partnerships | Better off | Percent of partners who report the Judy Center partnership improved their capacity to support families |
| Component 5:  Family Engagement | Better off | Percent of parents who report the Judy Center helped them better understand child development |
| This measure relates to all components. | Better off | Percent of Pre-K parents who report the Judy Center helped them better work with their child’s school |
| This measure relates to all components. | Better off | Percent of parents who report the Judy Center helped their child increase their school readiness |

1. How will this performance measure be tracked? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. How are you doing on this performance measure?Is this performance measure heading in the right direction? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your target for the measure this year? The target should be ambitious, yet attainable. (Only provide the number/percent below.)

|  |
| --- |
| Type response here. |

1. What is the story behind this performance measure? What are the positive, negative, and anticipated factors that are playing a role in the data? If there are factors you think may be playing a role but are not sure and need to develop your understanding, please note that as well. (No more than 200 words)

|  |
| --- |
| Type response here. |

1. Who are partners that have a role to play? Provide a list of partners (including organizations or people that may not be members of the Judy Center Partnership) who could help you with addressing the factors listed above to improve on this specific performance measure. (Do not list all available partners; only partners who can help with this specific performance measure.)

|  |
| --- |
| Type response here. |

1. What would work to turn the curve/improve this performance measure? What are the strategies you think will best address the factors affecting the data listed above? (No more than 100 words)

|  |
| --- |
| Type response here. |

1. What is your Action Plan to turn the curve/improve this performance measure? From the ideas in the previous question (what would work), which idea(s) will you put into action? What steps do you plan to take to improve this performance measure? Consider who will be responsible for taking action on each step and by when this step should occur. Focus on how you will improve upon actions previously taken to address this performance measure or new actions that you think will help.

For ongoing or recurring action steps, please write the frequency of occurrence (do not write specific dates). Answers must be entered into the table below; do not insert any additional rows in the table. This action plan should cover no more than a one-year period.

|  |  |  |
| --- | --- | --- |
| **Action Step** | **Who** | **When** |
|  |  |  |
|  |  |  |
|  |  |  |

# Budget (year 1)

Please provide a detailed budget of the requested funds for years 1-3 of the grant period by using the categories listed below. Add more rows if needed. An MSDE [Grant Budget C-125](https://www.marylandpublicschools.org/about/Documents/Grants/GrantForms-12-10-2020.xls) form must also be completed, signed and submitted as an appendix.

### 1. Salaries & wages

List separately for each position.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for salaries & wages: $ | | | | |

### 2. Fringe Benefits

List separately for each position.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for fringe benefits: $ | | | | |

### 3. Travel

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for travel: $ | | | | |

### 4. Supplies & Materials

List for each individual activity.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for supplies & materials: $ | | | | |

### 5. Contractual Services

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for contractual services: $ | | | | |

### 6. Other

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for other: $ | | | | |

### 7. Indirect Costs

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
| Subtotal for indirect costs: $ | | | | |

|  |
| --- |
| Total amount for year 1: $ |

# Budget (year 2)

Please provide a detailed budget of the requested funds for years 1-3 of the grant period by using the categories listed below. Add more rows if needed.

### 1. Salaries & wages

List separately for each position.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for salaries & wages: $ | | | | |

### 2. Fringe Benefits

List separately for each position.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for fringe benefits: $ | | | | |

### 3. Travel

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for travel: $ | | | | |

### 4. Supplies & Materials

List for each individual activity.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for supplies & materials: $ | | | | |

### 5. Contractual Services

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for contractual services: $ | | | | |

### 6. Other

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for other: $ | | | | |

### 7. Indirect Costs

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
| Subtotal for indirect costs: $ | | | | |

|  |
| --- |
| Total amount for year 2: $ |

# Budget (year 3)

Please provide a detailed budget of the requested funds for years 1-3 of the grant period by using the categories listed below. Add more rows if needed.

### 1. Salaries & wages

List separately for each position.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for salaries & wages: $ | | | | |

### 2. Fringe Benefits

List separately for each position.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for fringe benefits: $ | | | | |

### 3. Travel

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for travel: $ | | | | |

### 4. Supplies & Materials

List for each individual activity.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for supplies & materials: $ | | | | |

### 5. Contractual Services

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for contractual services: $ | | | | |

### 6. Other

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Subtotal for other: $ | | | | |

### 7. Indirect Costs

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line item** | **Calculation** | **Requested** | **In-Kind** | **Total** |
|  |  |  |  |  |
| Subtotal for indirect costs: $ | | | | |

|  |
| --- |
| Total amount for year 3: $ |
| Total for years 1-3: $ |

# Appendix

The following Appendices must be included in the proposal for funding:

* A job description for a full-time Judy Center Coordinator
* A job description for a full-time Family Services Coordinator
* A list of Steering Committee members, their titles, and organizational affiliations
* A list of participating agencies and programs (partners)
* A [signed C-1-25 MSDE budget form](https://www.marylandpublicschools.org/about/Documents/Grants/GrantForms-12-10-2020.xls) (for year 1)
* An MOU that meets the provisions of this program, and signed by all parties and partners
* A [signed recipient assurances page](https://www.marylandpublicschools.org/about/Documents/Grants/GrantRecipientAssurances.pdf)