00604 - ESSER III

Start of Block: Block 1

**ESSER III  
Out of School Time Programs**   
This grant is funded through the American Rescue Plan (ARP) Act of 2021. The purpose of this competitive grant funding is to address the academic, social, emotional and mental health needs of students most severely impacted by the COVID-19 pandemic through high quality and evidence-based Out-of-School Time (OST) programs. Applicants are required to identify the students most severely impacted by the COVID-19 pandemic and develop out of school time programs to address the target group(s).  
   
**Application Due: October 14, 2022, 4:00 pm CST**  
   
If you would like to preview some response examples, available at <https://dpi.wi.gov/sites/default/files/imce/forms/pdf/f00604Ex.pdf>.  
   
**Before Starting Application You will need...**

* contact information for your school administrator, project coordinator for this grant, and your business office,
* a project narrative,
* an action plan that includes: timeline, evidence of completion, and personnel responsible,
* and a project budget.

**Helpful Hints**

1. Use the Chrome browser for best results.
2. You can leave the survey and resume progress later, so long as you return on the same browser where you started the survey.
3. You may want to prep some of your answers in advance. We have provided a word document that you can download to help with that process.

If you have questions, please contact <ESSER3ost@dpi.wi.gov>.

End of Block: Block 1

Start of Block

General Information

**Agency Information**

Applicant Agency

Street Address

City

Zip

**Eligibility Type**

Public School District/Local Education Agency eligible for Sparsity Aid

Public School District/Local Education Agency not eligible for Sparsity Aid

Community-Based-Organization

**Number of sites to be served under this proposal**

**Names of Site(s)**

**Agency Administrator**

Name *First and Last*

Pronouns

Title

Email Address

Phone Number

**Project Contact**

Name *First and Last*

Pronouns

Title

Email Address

Phone Number

**Fiscal Contact**

Name *First and Last*

Pronouns

Title

Email Address

Phone Number

Q2.8 **Will you be applying as a consortia?**

Yes

No

If yes, you will need to download [PI-9550-C Consortium Verification](https://dpi.wi.gov/sites/default/files/imce/forms/pdf/f1500.pdf). You will be asked to upload this at the end of the application.

**Total Funds Requested:**

**Project Narrative**  
Provide a narrative of the proposal describing the scope and projected outcomes of your project. Include the targeted population(s), the key needs, and what the project ultimately seeks to implement. Also include how you plan to implement this project across your agency. *Character limit 4000*

End of Block: General Information

Start of Block: Assurances

**Federal General Assurances**

**Program Specific Assurances**

**Certification Regarding Lobbying**

You must download these assurances and send them to your Authorized Agency Signer for signature. You will be asked to upload the signed document as a PDF at the end of this application.  
   
 [00604A - GRANT ASSURANCES for ESSER III - Out of School Time Programs](https://dpi.wi.gov/sites/default/files/imce/forms/pdf/f00604A.pdf)

End of Block: Assurances

Start of Block: Readiness

**Readiness**

**Stakeholders -**Stakeholders include the population(s) to be served, families, community partners, school staff and administrators, as well as agency administrators. Be sure to include stakeholders who demographically represent the target population(s).

**Who are the stakeholders identified for this grant project and what are the roles of these stakeholder groups in the implementation of the grant project?***Stakeholders may include community-based organizations such as youth serving organizations, community based mental health agencies, faith-based organizations, park and recreation agencies, tribal organizations, or any other community agency or organization (for profit or non-profit) that is committed to improving conditions for local children and youth.*

Character Limit 1500

**What input did the stakeholders above provide that informed this grant project?**  
*Character Limit 1500*

**How will stakeholders continue to provide input if the grant project is funded?**

*Character Limit 1500*

End of Block: Readiness

Start of Block: Plan

**Plan**

Identify the need(s) to be addressed with grant funds. Applicants must have an organized and systematic approach to use data for meaningful analysis. Data analysis includes an assessment of the needs experienced by the target population(s).

**Demonstration of Need**

**Identify the overall specific need(s) for the target population(s) to be addressed by the grant project. Include the supporting data that is being used to determine the need(s). Include data indicators such as rates of absenteeism, data supporting rates of student engagement and social and emotional well-being.**  
   
Data sources should be local and can include (but are not limited to): Student self-reported data, state academic assessments, local academic assessments, Social, Emotional and Behavioral (SEB) screenings, student, family and community surveys, district/agency climate surveys, and focus group data. Analyze the data to determine the target population(s) most impacted by the COVID 19 pandemic. Target populations may include but are not limited to: Specific grade level(s), gender identity, students scoring below proficiency in core academic areas, English Learners, students with disabilities, LGBTQ+ students, students of color, student socio-economic status, students experiencing homelessness, student migratory or refugee status.  
   
See an Example Response at <https://dpi.wi.gov/sites/default/files/imce/forms/pdf/f00604Ex.pdf>.

*Character Limit 1500*

**What is the likely root cause(s) (i.e., factors, resource inequities, opportunity gaps, etc.) contributing to the need(s) to be addressed by this grant project?**

*Character Limit 1500*

**Define your Priority Area(s) or Statement(s) to address the root cause of the needs. What is your approach to address one or more of the root causes for this grant project and how does this grant project fit into this approach?**

*Character Limit 1500*

End of Block: Plan

Start of Block: Do/Action Plan - Goal 1

**Do (Action Plan)**

Develop an action plan to implement the proposed grant program. The plan must include SMART (Specific, Measurable, Attainable, Relevant and Timely) goals that align with Priority Area(s) defined in the previous section.  
   
Applicants must have at least one SMART goal to address academic needs and one SMART goal to address social, emotional and mental health needs. **Applicants may have up to 5 SMART Goals in total.**   
For each SMART goal listed, include the action step(s) (i.e., activities to be implemented) to achieve the goal. Action steps must include evidence-based strategies (e.g., activity, strategy, or intervention that demonstrates a positive effect on improving student outcomes and/or adult practices) or other activities to achieve the goal. Applicants may have up to 10 Action Steps for each SMART Goal.  
   
For each action step, indicate all Evidence-based Afterschool Framework Criteria that are addressed by the action step. List the planned completion date, evidence of completion (description of how the applicant will know the action is complete and often reflects the goal), and the personnel responsible for completing the action.  
   
Examples of SMART Goals and Actions Steps can be found at <https://dpi.wi.gov/sites/default/files/imce/forms/pdf/f00604Ex.pdf>.

**SMART Goal - Number 1**

**Priority Area and Supporting Data**

**SMART Goal to Address**

Academic Needs

Social Emotional Needs

Other

**Evidence-based Afterschool Framework Elements**   
Please check all elements addressed by this goal and its action steps:

Active hands-on learning experiences

Development and practice of interpersonal competencies

Meaningful and relevant activities and learning opportunities

Opportunities to practice skills that promote mastery

Learning that engages students in new experiences and development of new skills, while prioritizing student voice and choice

Programming that engages community partnerships and collaboration, including adult family members

**Applicants may have up to 10 Action Steps for each SMART Goal.**

**Action Plan**   
**Goal # 1 - Action Step #1**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 1 - Action Step #2**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 1 - Action Step #3**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 1 - Action Step #4**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 1 - Action Step #5**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 1 - Action Step #6**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 1 - Action Step #7**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 1 - Action Step #8**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 1 - Action Step #9**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 1 - Action Step #10**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

You have reached the maximum number of Actions Steps for Goal 1.

End of Block: Do/Action Plan - Goal 1

Start of Block: Do/Action Plan - Goal 2

**SMART Goal - Number 1**

**Priority Area and Supporting Data**

**SMART Goal to Address**

Academic Needs

Social Emotional Needs

Other

**Evidence-based Afterschool Framework Elements**   
Please check all elements addressed by this goal and its action steps:

Active hands-on learning experiences

Development and practice of interpersonal competencies

Meaningful and relevant activities and learning opportunities

Opportunities to practice skills that promote mastery

Learning that engages students in new experiences and development of new skills, while prioritizing student voice and choice

Programming that engages community partnerships and collaboration, including adult family members

**Applicants may have up to 10 Action Steps for each SMART Goal.**

**Action Plan**   
**Goal # 2 - Action Step #1**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 2 - Action Step #2**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 2 - Action Step #3**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 2 - Action Step #4**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 2 - Action Step #5**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 2 - Action Step #6**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 2 - Action Step #7**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 2 - Action Step #8**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 2 - Action Step #9**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

**Action Plan**   
**Goal # 2 - Action Step #10**

Program Activities

Timeline or Planned Completion Date

Evidence of Completion

Personnel Responsible

You have reached the maximum number of Actions Steps for Goal 2.

**Do you have another SMART Goal to add?**

**Applicants may have up to 5 SMART Goals in total.  
Applicants may have up to 10 Action Steps for each SMART Goal.**

End of Block: Do/Action Plan - Goal 2

Start of Block: Action Plan Barriers

**Action Plan (continued)**

**What actual or perceived barriers exist in your community that may prevent students and families in need of out-of-school time programming from accessing or participating in ESSER III funded out-of-school time activities listed in your plan?** *Character Limit 1500*

**What steps are you, or will you, be taking to address these barriers to participation?**

*Character Limit 1500*

End of Block: Action Plan Barriers

Start of Block: Study/Evaluation

**Study/Check**

**What is the process used to collect and analyze grant specific data?** *Character Limit 1500*

**Should the data indicate a need for change, what is the process for changing or making improvements to the action steps?** *Character Limit 1500*

**What is the process to share evaluation results with the public?** *Character Limit 1500*

End of Block: Study/Evaluation

Start of Block: Act/Coordination

**Act (Coordination)**

Describe the plans to coordinate with other programs during the grant period.

**How will the grant project align with existing or available initiatives or programs (e.g., current out-of-school time programming, curriculum, evidence-based programs, Equitable Multi-level Systems of Support, comprehensive school-based mental health, etc.) to address the priorities defined in the Action Plan?** *Character Limit 1500*

**What are the protocols for ongoing communication about the grant project with internal and external stakeholders? Describe the procedures for communicating the grant project within and across the system.** *Character Limit 1500*

End of Block: Act/Coordination

Start of Block: Budget Narrative

**Budget Narrative**

How will the grant funds be used to address the identified SMART goals during the grant cycle?   
  
Narrative should include how funds will be used to support the target population(s), number of sites and number of students to be supported. Spending must be reasonable and necessary to implement the Action Plan. *Character Limit 4000*

End of Block: Budget Narrative

Start of Block: File Uploads

If you indicated that you will be applying as a consortia. Please upload the completed [PI-9550-C Consortium Verification](http://dpi.wi.gov/sites/default/files/imce/forms/pdf/f1500.pdf).

Please upload the signed Federal and Program Assurances and Lobbying Certification.

You have completed the **ESSER III Out-of-School Time Grant application**. You may use the back button to review your responses. When you are ready, hit submit to send your application to DPI. A copy of your responses will be sent to the email address provided for the project contact.

End of Block: File Uploads