

Application for Participation

Maggie McIntosh School Arts Fund FY 2026

Maryland State Department of Education

200 West Baltimore Street Baltimore, Maryland 21201

Deadline

July 15, 2025 No later than 5:00 p.m. EDT

MARYLAND STATE DEPARTMENT OF EDUCATION

Carey M. Wright, Ed.D.

State Superintendent of Schools

Tenette Smith, Ed.D.

Deputy State Superintendent Office of Teaching and Learning

Wes Moore

Governor

MARYLAND STATE BOARD OF EDUCATION

Joshua L. Michael, Ph.D.

President, Maryland State Board of Education

Monica Goldson, Ed.D. (Vice President)

Chuen-Chin Bianca Chang, MSN, PNP, RN-BC

Susan J. Getty, Ed.D.

Nick Greer

Dr. Irma E. Johnson

Dr. Joan Mele-McCarthy, D.A., CCC-SLP

Rachel L. McCusker

Samir Paul, Esq.

Clarence C. Crawford (President Emeritus)

Abhiram Gaddam (Student Member)

Table of Contents

| Instructions | 3 |
|-----------------------------|----------------|
| Proposal Cover Page | 4 |
| Project Proposal | 5 |
| Budget and Budget Narrative | 7 |
| Appendices | 1 ⁻ |

Instructions

- 1. Complete this application electronically by typing directly into the fillable fields and charts.
- 2. Do not alter or remove sections.
- 3. When finished, save the application document as a pdf to your computer and obtain appropriate signatures.
- 4. The signed and completed application should be saved as a single pdf document and emailed as an attachment to elizabeth.devereux@maryland.gov with the subject "Arts Education in Maryland Schools Fine Arts Initiative FY 2026 Grant Application Submission".

Proposal Cover Page

| Project Title: | |
|--|------|
| Name of Contact Person: | |
| Contact Person Phone: | |
| Contact Person Email: | |
| Institution/Agency Name: | |
| Institution/Agency Address: | |
| Financial Contact Name: | |
| Financial Contact Email: | |
| | |
| | |
| | |
| Amount of the request for grant period (July 1, 2025 – June 30, 2026): \$250,000 | |
| (Should agree with Proposed Budget) | |
| | |
| Agency Head (Printed Name and Title) | Date |
| | |
| Signature of Agency Head | Date |
| orginatare or rigeries ricad | Date |

Project Proposal

| Project Proposal |
|--|
| Refer to the Project Proposal section of the Grant Information Guide for further detail. |
| Project Description: |
| |
| |
| |
| |
| Narrative and Purpose: |
| |
| |
| |
| |
| Goals and Measurable Outcomes: |
| |
| |
| |
| |

| Activity Plan and Timeline* | | | | | | | |
|-----------------------------|------------------------------|--|--|----------------------------------|--|--|--|
| Activity | Person/People Responsible | Milestone Dates/ Interim Deadlines (Month, Range, Division of Costs if Ongoing Activity) | Date of Completion/ Deadline (Month, Range, Ongoing) | Additional Notes (if applicable) | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

^{*}Please add additional rows for each grant activity, as necessary.

| Project Proposal - continued |
|--|
| Refer to the Project Proposal section of the Grant Information Guide for further detail. |
| Evaluation and Dissemination: |
| |
| |
| |
| |
| |

| Sign | ature |
|--------------------------------------|--------------------------|
| | |
| Agency Head (Printed Name and Title) | Signature of Agency Head |

Budget and Budget Narrative

Please provide a detailed description of the requested funds that will be spent by using the categories listed below. Add more rows if needed. An MSDE Grant Budget C-1-25 form must also be completed, signed, and submitted as an appendix.

1. SALARIES AND WAGES (LIST)

| Line Item | Calculation | Requested | In-Kind | Total |
|-----------|-------------------------------|-----------|---------|-------|
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | Total for Salaries and Wages: | \$ | \$ | \$ |

Using the space below, explain how the costs for salaries and wages above are necessary, reasonable, and cost-effective.

| Type response here | Type | res | ponse | here. |
|--------------------|------|-----|-------|-------|
|--------------------|------|-----|-------|-------|

2. CONTRACTED SERVICES

| Line Item | Calculation | Requested | In-Kind | Total |
|-----------|-------------|-----------|---------|-------|
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |

| Line Item | Calculation | Requested | In-Kind | Total |
|-----------|--------------------------------|-----------|---------|-------|
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | Total for Contracted Services: | \$ | \$ | \$ |

Using the space below, explain how the costs for contracted services above are necessary, reasonable, and cost-effective.

| Type response here | Ivpe | resi | ponse | here | ⊇. |
|--------------------|------|------|-------|------|----|
|--------------------|------|------|-------|------|----|

3. SUPPLIES AND MATERIALS

| Line Item | Calculation | Requested | In-Kind | Total |
|-----------|-----------------------------------|-----------|---------|-------|
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | Total for Supplies and Materials: | \$ | \$ | \$ |

Using the space below, explain how the costs for supplies and materials above are necessary, reasonable, and cost-effective.

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

4. OTHER CHARGES

| Line Item | Calculation | Requested | In-Kind | Total |
|-----------|-------------|-----------|---------|-------|
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |

| Line Item | Calculation | Requested | In-Kind | Total |
|-----------|--------------------------|-----------|---------|-------|
| | Total for Other Charges: | \$ | \$ | \$ |

Using the space below, explain how the costs for other charges above are necessary, reasonable, and cost-effective.

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

5. EQUIPMENT

| Line Item | Calculation | Requested | In-Kind | Total |
|-----------|----------------------|-----------|---------|-------|
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | Total for Equipment: | \$ | \$ | \$ |

Using the space below, explain how the costs for equipment above are necessary, reasonable, and costeffective.

6. TRANSFERS (INDIRECT COSTS)

| Line Item | Calculation | Requested | In-Kind | Total |
|-----------|----------------------|-----------|---------|-------|
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | | \$ | \$ | \$ |
| | Total for Transfers: | \$ | \$ | \$ |

| Using the space I | below, explain hov | the costs for | transfers above ar | re necessary, reasonable | , and cost- |
|-------------------|--------------------|---------------|--------------------|--------------------------|-------------|
| effective. | | | | | |

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

Total amount requested: \$

Appendices

The following appendices must be included. Include other appendices as deemed necessary.

Appendix A: A signed recipient assurances page

Appendix B: A signed C-1-25 MSDE budget form

Taxpayer identification number and certification (W-9 Form) Appendix C: