

Maryland State Department of Education  
200 West Baltimore Street  
Baltimore, Maryland 21201

Deadline  
June 10, 2024  
No later than 5:00 p.m. EDT

Application for Participation

State Aided Institutions (SAI) Program Fiscal Year 2026

MARYLAND STATE DEPARTMENT OF EDUCATION

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# Instructions

1. Review the information in the Grant Information Guide (GIG).
2. Complete this application electronically by typing directly into the fillable fields and charts.
3. When finished, save the application document as one pdf to your computer and obtain appropriate signatures.
4. Attach appendices to the pdf file.
5. The completed application should be saved as one pdf file and emailed to [sai.applications@maryland.gov](mailto:sai.applications@maryland.gov).

# Cover Page

## Organization Information

Organization Name:   
Organization Address:  
Contact Name:  
Contact Title:  
Contact Phone:  
Contact Email:

## Funding Request

Funding allocation for this grant period (July 1, 2025 – June 30, 2026): $

Will you be requesting an increase (augmentation) to your application?

If so, how much? $

Head of Institution Printed Name Title

Head of Institution Signature Date

## Eligibility Statement:

The organization hereby attests that they are presently in good standing with the State of Maryland and not subject to any bans, suspensions, or ineligibility issues that would prevent their participation in the grant program. In the event of any changes to status during the grant period, the organization agrees to promptly notify Maryland State Department of Education (MSDE). MSDE reserves the right to terminate the grant agreement if the organization is found to be ineligible at any point during the grant period.

Head of Institution Signature Date

# Project Narrative

Please refer to the Grant Information Guide (GIG) for information on completing each section.

## Evidence of impact

Discuss your track record for success and briefly describe how your education program has had an impact on Maryland students and teachers. Include data such as service numbers, survey, or evaluation data, and how your organization has expanded.

Enter text here.

Provide the projected numbers of students and teachers expected to be served in SAI-funded activities by completing the chart below:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Fiscal Year 2024 (actual)** | **Fiscal Year 2025 (projected)** | **Fiscal Year 2026 (projected)** |
| Number of LEAs served |  |  |  |
| Number of total public schools served |  |  |  |
| Number of schools designated as Title 1 |  |  |  |
| Number of nonpublic/homeschools served |  |  |  |
| Number of PreK-12 students served |  |  |  |
| Number of students with a disability served |  |  |  |
| Number of teachers served |  |  |  |
| Number of chaperones/other adults served |  |  |  |

Note: No more than 20% of participants served may come from nonpublic or homeschools.

## Program goals and Evaluation

Applicants are required to set overall goals for the project. Determining the program goal(s) is an important part of the next step of evaluating your program. Please provide program goals below and describe how the goals will be evaluated. Add additional rows as necessary.

|  |  |
| --- | --- |
| Goal 1: |  |
| Evaluation: |  |
| Goal 2: |  |
| Evaluation: |  |

*\*Add more rows if needed.*

## Educational Programming and Outreach

Indicate what grade levels your SAI-funded program will serve.

Early Childhood (PreK – Kindergarten)

Elementary School (1st grade – 5th grade)

Middle School (6th grade – 8th grade)

High School (9th – 12th grade)

Other (explain) Click or tap here to enter text.

Provide a clear description of the proposed education program and how it will be implemented. State explicitly how it extends learning beyond the classroom and provides enriching experiences for students.

Enter text here.

Identify the educational standards met by your educational program.

|  |  |  |
| --- | --- | --- |
| **Content Area** | **Standard / Priority** | **How does your education program connect to this standard?** |
| Choose an item. |  |  |
| Choose an item. |  |  |
| Choose an item. |  |  |

*\*Add more rows if needed.*

Describe your outreach plan to expand and reach more Maryland students and teachers. Refer to the Grant Information Guide for guidance.

Enter text here.

## Project timeline

Complete the project timeline below with key activities necessary for the successful implementation of the education program, including the estimated months for field trips.

|  |  |
| --- | --- |
| **Key Activities** | **Time Frame/Dates** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

*\*Add more rows if needed.*

## KEy Personnel

Provide a list of the staff or personnel responsible for the successful implementation and monitoring of the grant requirements by completing the chart below. Any position whose salary is listed in the proposed budget must be listed here.

|  |  |  |
| --- | --- | --- |
| **Name** | **Title** | **Responsibilities** |
|  |  |  |
|  |  |  |

*\*Add more rows if needed.*

# 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.

## Salaries & Wages (list separately for each position)

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

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

Type response here.

## Contracted Services

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

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

Type response here.

## Supplies & Materials

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

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

Type response here.

## Equipment

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

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

Type response here.

## Other

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

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

Type response here.

|  |  |
| --- | --- |
| Total Requested: | $ |

An MSDE [Grant Budget C-1-25](https://marylandpublicschools.org/about/Documents/Grants/GrantForms-12-10-2020.xls) form must also be completed, signed, and submitted as an appendix. Please enter all category totals on line 214.

# Funding Augmentation (optional)

Institutions requesting additional funds must complete this section. Institutions that are not requesting a funding increase can disregard or delete this section.

Provide a justification for the increase.

Type response here.

Who will be served with the additional funds?

Type response here.

What are the objectives of the educational program?

Type response here.

What are the anticipated outcomes?

Type response here.

Provide a budget for how the additional funds will be spent.

## Salaries & Wages

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

## Contracted Services

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

## Supplies & Materials

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

## Equipment

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

## Other

|  |  |  |
| --- | --- | --- |
| Line item/Description | Calculation | Total |
|  |  | $ |
|  |  | $ |
|  | Total: | $ |

|  |  |
| --- | --- |
| Total Augmentation Requested: | $ |

# Appendices

The following appendices must be included in the proposal for funding, but do not apply to the page limit of the project narrative.

Appendix A: Fiscal Impact Statement

Appendix B: Student safety response

Appendix C: General Education Provisions Act (GEPA) Section 427 response

Appendix D: A signed MSDE [Grant Budget C-1-25](https://marylandpublicschools.org/about/Documents/Grants/GrantForms-12-10-2020.xls) form

Appendix E: A list of the members of the independent governing board including their name, title, and affiliation

Appendix F: Evidence of status of a [non-profit 501(c)(3) organization](https://www.irs.gov/charities-non-profits/charitable-organizations/exemption-requirements-501c3-organizations)

Appendix G: Evidence of active liability insurance coverage

Appendix H: A detailed operating budget that indicates that less than 50% of the budget comes from state grants (except for the Baltimore Zoo), specifies all sources of income (including grants received, name of granting agency, and amount of each grant), and specifies all expenditures

Appendix I: A copy of the most recent independent annual audit or copies of the most recent internally generated financial statement until the annual audit is available

## Appendix A: Fiscal Impact Statement

Respond to the questions below.

### Educational Program

Briefly describe the educational program.

Type response here.

### Population

Please indicate the population that will be served.

Type response here.

### Educational goals

Please provide the education goals from the project narrative in the space below. Add additional rows as needed.

|  |  |
| --- | --- |
| Goal 1: |  |
| Goal 2: |  |

### Anticipated Outcomes

What are the anticipated outcomes?

Type response here.

## Appendix B: Student Safety

Describe how your organization keeps minors safe and conducts background checks on those that are supervising or have access to minors. Refer to the Grant Information Guide for guidance.

Type response here.

## Appendix C: General Education Provisions Act ([GEPA](https://oese.ed.gov/files/2021/10/General-Education-Provisions-Act-GEPA-Requirements-Section-427-ED-GEPA-427-Form.pdf)) Section 427 Response

What barriers may impede equitable access and participation of students and educators?

Type response here.

Based on the barriers identified above, what steps have you taken or will you take to address equitable access to, and equitable participation in, the educational program?

Type response here.