



## **FLORIDA DEPARTMENT OF EDUCATION**

### **Request for Application (RFA)**

#### **Bureau / Office**

Division of Community Colleges and Workforce Education

#### **Program Name**

Adult Education and Family Literacy – **Native American Education (Continuation)**

#### **Specific Funding Authority (ies)**

Adult Education and Family Literacy Act State Grant Programs Title II of the Workforce Investment Act of 1998 (hereafter referred to as “Act”), CFDA #84.002

Web site: [http://12.46.245.173/pls/portal30/CATALOG.PROGRAM\\_TEXT\\_RPT.show](http://12.46.245.173/pls/portal30/CATALOG.PROGRAM_TEXT_RPT.show)

#### **Funding Purpose/Priorities**

To improve the local adult education system in the Native American population.

#### **Type of Award**

Discretionary

#### **Total Funding Amount**

\$100,000 -- see the **Allocation Chart** in the **Attachments** section

#### **Budget Period**

July 1, 2005 to June 30, 2006

Applications received after the due date will be effective on the date of receipt in Grants Management or award of federal funds, whichever is later.

#### **Program Performance Period**

Same as **Budget Period**, see above.

#### **Target Population**

Qualifying adults must: have obtained the age of 16; not enrolled or required to be enrolled in a secondary school; lacking sufficient mastery of basic education skills to enable the individual to function effectively in society; lacking a secondary education; or are unable to speak, read or write the English language. Act, Section 203(1)(A-C)

#### **Eligible Applicant(s)**

Currently funded agencies per the **Allocation Chart** in the **Attachments** section.

#### **Application Due Date**

**June 28, 2005.** The due date refers to the date of receipt in Grants Management. Facsimile and e-mail submissions will not be accepted.

## **Contact Persons**

Grants Administration Contacts: see **Attachments** section for contact information listed by county  
Grants Management Contact: Debbie Bradford, 850.245.0746, [Debbie.Bradford@fldoe.org](mailto:Debbie.Bradford@fldoe.org)

## **Assurances**

The Department of Education has developed and implemented a document entitled, General Terms, Assurances and Conditions for Participation in Federal and State Programs, to comply with:

- 34 CFR 76.301 of the Education Department General Administration Regulations (EDGAR) which requires local educational agencies to submit a common assurance for participation in federal programs funded by the U.S. Department of Education;
- applicable regulations of other Federal agencies; and
- State regulations and laws pertaining to the expenditure of state funds.

In order to receive funding, applicants must have on file with the Department of Education, Office of the Comptroller, a signed statement by the agency head certifying applicant adherence to these General Assurances for Participation in State or Federal Programs. The complete text may be found at <http://www.firn.edu/doe/comptroller/gbook.htm>

## **School Districts, Community Colleges, Universities and State Agencies**

The certification of adherence filed with the Department of Education Comptroller's Office shall remain in effect indefinitely unless a change occurs in federal or state law, or there are other changes in circumstances affecting a term, assurance, or condition; and does not need to be resubmitted with this application.

## **Private Colleges, Community-Based Organizations, and Other Agencies**

In order to complete requirements for funding, applicants must submit the certification page signed by the agency head certifying applicant adherence to the general terms, assurances, and conditions. Please note that private colleges, community-based organizations, and other non-public agencies must also submit copies of the organization's current budget, a list of its board of directors, and if available, a copy of its most recent annual audit report prepared by an independent certified public accountant licensed in this state. *These items must be submitted prior to the issuance of a project award.*

## NARRATIVE SECTION

Narrative responses must be typed in 12-point font and double spaced. There is a three page maximum for the narrative response portion of the application package not including any requested forms.

For a list of all items to be included in the application package, please see the **Application Review Criteria and Checklist** in the **Attachment** section.

### **For Federal Programs General Education Provisions Act (GEPA)**

Provide a concise description of the process to ensure equitable access to, and participation of students, teachers, and other program beneficiaries with special needs. For details refer to web site: <http://www.ed.gov/policy/fund/guid/gposbul/gpos10.html>

### **Project Design**

For **Project Design** complete the **Self-Assessment Evaluation Form** in the **Attachments** section. This form not included in three page maximum for narrative responses.

### **Support for Strategic Imperatives**

Describe how the proposed project will incorporate reading initiatives and one or more of the Florida State Board of Education (SBE) strategic imperatives.

URL: [http://www.fldoe.org/meetings/2005\\_01\\_18/StratPlanDetails.pdf](http://www.fldoe.org/meetings/2005_01_18/StratPlanDetails.pdf)

### **Dissemination/Marketing**

Describe methods /strategies you will use to disseminate and market information about the project to appropriate populations.

### **Program Information**

*Florida's State Plan for Adult Education and Family Literacy*

Web site: [http://www.firn.edu/doe/workforce/plan\\_adult.htm](http://www.firn.edu/doe/workforce/plan_adult.htm)

### **National Priorities of the Federal Adult Education and Family Literacy Act**

Act, Section 202(1-3)

It is the purpose of this Act to create a partnership among the federal government, states and localities to provide, on a voluntary basis, adult education and literacy services in order to:

1. Assist adults in becoming literate and obtaining the knowledge and skills necessary for employment and self-sufficiency.
2. Assist adults who are parents in obtaining the educational skills necessary to become full partners in the educational development of their children.
3. Assist adults in completing high school or the equivalent.

## **State Priorities based on the Federal Adult Education and Family Literacy Act**

1. Provide educational services to adults who are functioning at the eighth grade level and below.
2. Provide educational services to adults who do not have a secondary school diploma or its recognized equivalent – General Educational Development (GED).
3. Strengthen linkages with private sector employers and other agencies as well as workplace literacy programs.
4. Provide English language courses for adults whose native language is other than English.
5. Expand English Literacy and Civics programs with an emphasis on attainment of U. S. citizenship.
6. Disseminate exemplary programs in adult education and family literacy.
7. Expand recruitment activities and participation of senior adult learners 55 and older.
8. Expand Health Education Literacy programs.

## **Performance Measures/Goals Based on Deliverables**

Awarded projects are based on performance with clearly defined performance measures/goals as deliverables.

Projected goals **must be increased from the previous year's goals** for continued funding. **Note:** If deliverables are reduced, a corresponding reduction in funding will occur.

All Native American Education projects must address *Primary Core Measure* number one.

*Primary Core Measures* number two and three must also be addressed if these services are provided by the project.

The *Primary Core Measures* must be addressed by applicants through completion of the **Performance-Based Project Deliverables Form** found in the **Attachments** section.

### ***Primary Core Measures:***

Act, Section 212 (2)(A) (i-iii)

#### **1. Educational Gains\* -- must be addressed**

Demonstrate improvements in literacy skill levels in any of the following: reading, writing and speaking in the English language, numeracy, problem-solving, English language acquisition, and other literacy skills.

NRS reporting requires that the learner completes or advances one or more educational functioning level(s) from starting level measured on entry into the program.

***Gains must be validated through the use of an NRS approved assessment instrument.***

*\*An educational gain is defined by the state of Florida as attainment of a literacy completion point (LCP).*

#### **2. Placement, Retention and Completion -- address if applicable**

Placement in, retention in, or completion of postsecondary education, unsubsidized employment or career advancement.

#### **3. Receipt of secondary school diploma or its recognized equivalent – a State of Florida High School Diploma, General Education Development (GED) -- address if applicable**

## **Compliance Monitoring**

*Florida's State Plan for Adult Education and Family Literacy Education* includes the provision that the state will evaluate the effectiveness of project activities based on established and approved performance goals. The Program Support and Compliance Team (PSCT) monitors recipients'

compliance with program and fiscal requirements according to applicable federal and state laws and regulations specified by Education Department General Administrative Regulations (EDGAR), Office of Management and Budget (OMB) Circulars, and Florida Department of Financial Services *Reference Guide for State Expenditures* and, in addition, guidelines published in the Florida Department of Education's *Green Book*. These compliance references are available at the following web site: <http://www.firn.edu/doe/workforce/compliance.htm>

## **Reporting Outcomes**

### **National Reporting System (NRS)**

- NRS reporting is required for recipients of federal Adult Education and Family Literacy funds from the US Department of Education. Recipients must compile, report and maintain program performances in order to provide accountability. Failure to comply with this federal requirement by the established deadline may result in ineligibility for future funding.

Training for NRS for agency project coordinators will be conducted by the Florida Department of Education, Adult Education Unit, to provide technical assistance to ensure compliance with NRS (dates to be announced).

To review required NRS data forms, please visit:

<http://www.firn.edu/doe/arm/cctemis/nrs/nrsmain.htm>

For more information regarding the NRS guidelines, please visit: <http://www.nrsweb.org>

### **Mid-year and Final Performance Reports - Workforce Education, Grants Administration**

- Mid-year Performance Report is due January 14, 2006. If the Mid-year Performance Report reflects less than 40 percent achievement for any project goal, then strategies for goal achievement must be addressed.
- Final Performance Report is due July 15, 2006.
- The Mid-year and Final Performance reporting system is located on the Division of Community Colleges and Workforce Education web site at: <http://info.doe.state.fl.us/wffunding/>

## **Funding Method**

All applicants are advised that grantees will be funded according to the projected goals in their applications. In the event that performances do not meet projected goals and result in overpayment, the overpayment must be returned to the Florida Department of Education by August 20, 2006, along with the final DOE 499 form. Monitoring and performance reports will assist grantees in achieving their performance goals and avoiding overpayment.

Funded recipients will receive their allocation to be determined by the Florida Department of Education as follows:

Federal Cash Advance - On-Line Reporting required monthly to record expenditures.

Federal cash advances will be made by state warrant or electronic funds transfer (EFT) to a recipient for disbursements. For federally funded projects, requests for federal cash advance must be made on the Electronic Federal Cash Advance Request System. If at times it is determined that disbursements are going to exceed the amount of cash on hand plus cash in transit, an on-line amendment can be made prior to the due date of the next Federal Cash Advance distribution on the Electronic Federal Cash Advance Request System.

Reimbursement of Expenditures - Payment made upon submission of documented allowable expenditures. Reimbursements will be made by state warrant after disbursements are made by the recipient. Requests for reimbursement with the appropriate back-up documentation should be submitted in accordance with applicable program requirements and instructions on the Project Award Notification.

Reimbursement with Performance - Payment made upon submission of documented allowable expenditures, plus documentation of completion of specified performance objectives.

### **Fiscal Requirements**

Supporting documentation for expenditures is required for all funding methods. Examples of such documentation include: invoices with check numbers verifying payment, and/or bank statements; all or any of which must be available upon request.

### **Records Retention**

It is the responsibility of the fiscal agency to retain records for financial transactions and supporting documentation for auditing purposes. If records are request by the Florida Department of Education or the State of Florida Division of Financial Services, all records must be provided. Records should be maintained for five years from the last day of the program or longer if there is an ongoing investigation or audit.

### **Funding Shall Supplement, Not Supplant**

In general, the Act states that the funds made available for Adult Education and Family Literacy activities shall supplement and not supplant other state or local public funds expended for Adult Education and Family Literacy programs.

### **Non-duplication of Effort**

It is the responsibility of the eligible agency to coordinate and insure non-duplication with other federal and state education, training, corrections, public housing, and social service programs.

### **Local Administrative Cost**

The Act contains the requirements pertaining to local administrative costs. Not less than 95% of the funds shall be expended for carrying out Adult Education and Family Literacy activities. The remaining amount, not to exceed 5%, may be used for:

- Planning
- Personnel development
- Interagency coordination
- Administration
- Indirect costs

Positions such as project coordinator, accountant, clerical staff, or other positions not directly serving students are considered administrative. Travel, equipment, and supplies for administrators are also considered administrative costs unless used for the purpose of providing personnel development directly related to program and/or students, and direct assistance to career and technical education students. **Indirect costs are considered administrative costs.**

### **Project Disbursement Report**

DOE 499, Project Disbursement Report is due by August 20, 2006.

## **Conditions for Acceptance**

The requirements listed below must be met for applications to be considered for review:

- 1) Application is received in DOE within the timeframe specified by the RFA
- 2) Application includes required forms: DOE 101-Budget Narrative and DOE 100A-Application
- 3) All required forms have original signatures by an authorized entity
- 4) Application must be submitted to:

Bureau of Grants Management  
Florida Department of Education  
325 West Gaines Street, Room 325  
Tallahassee, FL 32399-0400

**NOTE:** Applications signed by officials other than the appropriate agency head identified above must have a letter signed by the agency head, or documentation citing action of the governing body delegating authority to the person to sign on behalf of said official. Attach the letter or documentation to the DOE 100A when the application is submitted.

## **Other Requirements**

In addition to the DOE 101-Budget Narrative and DOE 100A-Application, also include:

- Performance-Based Project Deliverables Form
- Invoice Schedule Form – if applicable
- Regional Workforce Board Coordination Assurance Form
- Written responses to the **Narrative Requirements** section
- Application Review Criteria and Checklist
- **Community-Based Organizations** – must also include the following:
  - List of current Board of Directors and Articles of Incorporation
  - Copy of current operating budget
  - Copy of current audit report - if available
  - Copy of Chart of Accounts
  - General Terms, Assurances and Conditions for Participation in Federal and State Programs
  - Proof of eligibility to operate a business in Florida (signed document from Florida Secretary of State)

Submit:

- One application with original signatures
- Three copies of the application

Be sure to review and adhere to the application guidelines to ensure that all sections of the application have been addressed.

## **Method of Review**

All applications will be reviewed by Florida Department of Education, Division of Community Colleges and Workforce Education staff using the Application Review Criteria and Checklist in the Attachments section.

In addition, fiscal information will also be reviewed by Division of Finance and Operations, Bureau of Grants Management staff.

DOE 900

Revised 03/2005

# ATTACHMENTS

- Allocations Chart
- DOE 100A, Project Application
- DOE 101, Budget Narrative Form
- Regional Workforce Board Coordination Assurance Form
- Self-Evaluation Assessment Form
- Performance-Based Project Deliverables Form
- Invoice Schedule
- Grants Administration Contacts
- Application Review Criteria and Checklist

**Allocation Chart  
for  
Native American Education - Continuation  
FY 2005-06**

<b>Agency</b>	<b>Project Number FY 2004-05</b>	<b>Allocation FY 2005-06</b>
Miccosukee Tribe of Indians of Florida	722-1915A-5CN01	\$ 100,000
<b>TOTAL</b>		<b>\$ 100,000</b>

# FLORIDA DEPARTMENT OF EDUCATION

## Project Application

TAPS Number <b>06B016</b>
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<b>Please return to:</b>  Florida Department of Education Bureau of Grants Management Room 325B Turlington Building 325 West Gaines Street Tallahassee, Florida 32399-0400 Telephone: (850) 245-0498 Suncom: 205-0498	<b>Program Name:</b>  <b>Adult Education and Family Literacy                  Native American Education                  (Continuation)                  Discretionary                  Fiscal Year 2005-2006</b>	<u><b>DOE USE ONLY</b></u>  Date Received
<b>B) Name and Address of Eligible Applicant:</b>		<b>Project Number (DOE Assigned)</b>
<b>C) Total Funds Requested:</b>  \$ _____  <hr style="width: 200px; margin-left: 0;"/> <div style="background-color: #e0e0e0; padding: 5px; text-align: center;"> <b>DOE USE ONLY</b> </div> <b>Total Approved Project:</b>	<b>D) Applicant Contact Information</b>	
	Contact Name: _____	Mailing Address: _____
	Telephone Number: _____	SunCom Number: _____
	Fax Number: _____	E-mail Address: _____
<b>CERTIFICATION</b>		
<p>I, _____, (<i>Please Type Name</i>) do hereby certify that all facts, figures, and representations made in this application are true, correct, and consistent with the statement of general assurances and specific programmatic assurances for this project. Furthermore, all applicable statutes, regulations, and procedures; administrative and programmatic requirements; and procedures for fiscal control and maintenance of records will be implemented to ensure proper accountability for the expenditure of funds on this project. All records necessary to substantiate these requirements will be available for review by appropriate state and federal staff. I further certify that all expenditures will be obligated on or after the effective date and prior to the termination date of the project. Disbursements will be reported only as appropriate to this project, and will not be used for matching funds on this or any special project, where prohibited.</p> <p>Further, I understand that it is the responsibility of the agency head to obtain from its governing body the authorization for the submission of this application.</p>		
<b>E)</b> _____ <div style="text-align: center;">Signature of Agency Head</div>		

DOE 100A  
Revised 08/04



## Instructions for Completion of DOE 100A

- A.** If not pre-printed, enter name of the program for which funds are requested.
  - B.** Enter name and mailing address of eligible applicant. The applicant is the public or non-public entity receiving funds to carry out the purpose of the project.
  - C.** Enter the total amount of funds requested for this project.
  - D.** Enter requested information for the applicant's contact person. This is the person responsible for responding to all questions regarding information included in this application.
  - E. The original signature of the appropriate agency head is required.** The agency head is the school district superintendent, university or community college president, state agency commissioner or secretary, or the president/chairman of the Board for other eligible applicants.
- **Note:** Applications signed by officials other than the appropriate agency head identified above must have a letter signed by the agency head, or documentation citing action of the governing body delegating authority to the person to sign on behalf of said official. Attach the letter or documentation to the DOE 100A when the application is submitted.





# Instructions

## Budget Narrative Form

This form should be completed based on the instructions outlined below, unless instructed otherwise in the Request for Proposal (RFP) or Request for Application (RFA).

A. Enter Name of Eligible Recipient.

B. (DOE USE ONLY)

### COLUMN 1

**FUNCTION: SCHOOL DISTRICTS ONLY:**

Use the four digit function codes as required in the Financial and Program Cost Accounting and Reporting for Florida Schools Manual.

### Column 2

**OBJECT: SCHOOL DISTRICTS:**

Use the three digit object codes as required in the Financial and Program Cost Accounting and Reporting for Florida Schools Manual.

**COMMUNITY COLLEGES:**

Use the first three digits of the object codes listed in the Accounting Manual for Florida's Public Community Colleges.

**UNIVERSITIES AND STATE AGENCIES:**

Use the first three digits of the object codes listed in the Florida Accounting Information Resource Manual.

**OTHER AGENCIES:**

Use the object codes as required in the agency's expenditure chart of accounts.

### COLUMN 3 - ALL APPLICANTS:

**ACCOUNT TITLE:** Use the account title that applies to the object code listed in accordance with the agency's accounting system.

**NARRATIVE:** Provide a detailed narrative for each object code listed. For example:

- **SALARIES** - describe the type(s) of positions requested. Use a separate line to describe each type of position.
- **OTHER PERSONAL SERVICES** – describe the type of service(s) and an estimated number of hours for each type of position. OPS is defined as compensation paid to persons, including substitute teachers not under contract, who are employed to provide temporary services to the program.
- **PROFESSIONAL/TECHNICAL SERVICES** - describe services rendered by personnel, other than agency personnel employees, who provide specialized skills and knowledge.
- **CONTRACTUAL SERVICES AND/OR INTER-AGENCY AGREEMENTS** - provide the agency name and description of the service(s) to be rendered.
- **TRAVEL** - provide a description of each type of travel to be supported with project funds, such as conference(s), in district or out of district, and out of state. Do not list individual names. List individual position(s) when travel funds are being requested to perform necessary activities.
- **CAPITAL OUTLAY** - provide the type of items/equipment to be purchased with project funds.
- **INDIRECT COST** - provide the percentage rate being used. Use the current approved rate. (Reference the DOE Green Book for additional guidance regarding indirect cost.)

### COLUMN 4 – MUST BE COMPLETED FOR ALL SALARIES AND OTHER PERSONAL SERVICES.

**FTE** - Indicate the Full Time Equivalent (FTE based on the standard workweek for the type of position) number of positions to be funded. Determine FTE by dividing the standard number of weekly hours (e.g., 35 hours) for the type of position (e.g., teacher aide) into the actual work hours to be funded by the project.

### COLUMN 5

**AMOUNT** - Provide the budget amount requested for each object code.

C. **TOTAL** - Provide the total for Column (4) on the last page. Must be the same amount as requested on the DOE-100A or B.

DOE 101

Rev. 01/05

Page 2 of 2

John L. Winn, Commissioner



**REGIONAL WORKFORCE BOARD  
COORDINATION  
ASSURANCE FORM**

**Complete Section A or B as appropriate and include in application package.**

**-----Section A**

**The Superintendent or Agency Head certifies** that this application has been submitted to the Regional Workforce Board and that the activities outlined in the application are consistent with current Regional Workforce Board plans.

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Signature of Superintendent/Agency Head

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Date Submitted to Regional  
Workforce Board

*Regional Workforce Boards are invited to submit comments regarding the application to the Division of Community Colleges and Workforce Education, Grants Administration office by **June 14, 2005.***

**Note:** Section 121, Title I, Workforce Investment Act (WIA), sets expectations for recipients of Perkins postsecondary funds, or funds under Title II, WIA, Adult Education and Family Literacy, to enter into a Memorandum of Understanding with the Regional Workforce Board for participation in the One-Stop system.

**-----Section B**

**The Superintendent or Agency Head certifies** that this **application covers more than one Workforce Development Region.** The activities outlined in this application are related to Workforce Development and are consistent with the current Regional Workforce Board plans for all regions included in this application. *Application submission to the Regional Workforce Board is not required.*

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Signature of Superintendent/Agency Head

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Date

**Note:** Section 121, Title I, Workforce Investment Act (WIA), sets expectations for recipients of Perkins postsecondary funds, or funds under Title II, WIA, Adult Education and Family Literacy, to enter into a Memorandum of Understanding with the Regional Workforce Board for participation in the One-Stop system.

**Self-Evaluation Assessment Form  
Native American Education Projects (Continuation) for FY 05-06**

**Projects recommended for continuation funding must show successful performance accomplishments during the 2004-05 project year. Any shortfall or negative answer must be explained.**

Agency name: \_\_\_\_\_ County: \_\_\_\_\_

Project number for FY 04-05 funding year: \_\_\_\_\_ Date form prepared by applicant: \_\_\_\_\_

Prepared by (name and title): \_\_\_\_\_ E-mail: \_\_\_\_\_

Agency project coordinator (name and title): \_\_\_\_\_ E-mail: \_\_\_\_\_

	✓ YES	✓ NO	<b>Negative responses must be adequately explained.</b> Box will expand when text is typed. Use 12-point font and single spacing.
The agency project coordinator <u>understands requirements</u> of the National Reporting System (NRS) on-line reporting via the Internet.			
The agency project coordinator <u>has attended or identified a date to attend training</u> for National Reporting System (NRS) provided by the FL Dept. of Education, Adult Education Office.			
The agency project coordinator understands that on-line NRS reporting is required AND separate from the on-line Mid-year and Final Performance Reports to the Workforce Education Grants Administration Office.			
Are the services to be provided to the target population for FY 05-06 consistent with the approved FY 04-05 project plan?			
Are all applicable collaboration arrangements still in place (financial and non-financial)?			
Are grant expenditures directly related to and proportionate with performance outcomes achieved in FY 04-05.			
Have all projected performances and grant deliverables been satisfied to date as stated in the FY 04-05 approved plan?			

**Self-Evaluation Assessment Form -- Page Two**  
**Adult Education and Family Literacy -- Continuation Projects**

Any performance shortfalls must be explained by including corrective measures put into place to prevent future shortfalls.

**Please respond here:**

Do you need technical assistance? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, to facilitate service, please state your need(s) and your program manager will contact you.

**Please respond here:**

**The box below is for DOE staff use ONLY**

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_

**If not approved, provide justification:**

Has the agency project manager attended NRS training or registered for training from the Adult Education Unit? Yes \_\_\_\_\_ No \_\_\_\_\_

Does the agency need to be contacted? \_\_\_\_\_ yes \_\_\_\_\_ no Person contacted: \_\_\_\_\_ Date: \_\_\_\_\_

**Reason:**

Signature of Program Manager: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

## PERFORMANCE-BASED PROJECT DELIVERABLES FORM

### A. Project Information

Agency:	Telephone:
County:	E-Mail:
Contact Person:	Fax:
Title:	Grant Amount:

### B. Performance Goals (See definitions for core measures on following page.)

(1)  Primary Core Measures  Projected enrollment for 2005-2006 _____	(2)  Grant Budget per Core Measure		(3)  Total Number of Units per Core Measure	(4)  Unit Cost per Core Measure
1. Educational Gains  (Must be addressed by all applicants.)	\$	%		\$
2. Placement, Retention and Completion  (If this service is provided – must address.)	\$	%		\$
3. Receipt of secondary school diploma or its recognized equivalent -- (GED)  (If this service is provided – must address.)	\$	%		\$
<b>Totals</b>	<b>\$</b>	<b>100%</b>		

### Instructions for completing Section B:

1. In column 2, for each core measure applicable to applicant's program, indicate **both** the percentage of total grant budget and the actual dollar amount to be earned by each core measure. The total of all percentages in column 2 should be 100%, and the total of all core measure budgets should equal the total grant amount.
2. In column 3 calculate the total number of units per core measure to be achieved for the entire grant period.
3. In column 4 calculate the unit cost for each core measure by dividing the total budget amount in column 2 by the unit amount in column 3. For example, if the total budget amount in column 2 is \$25,000 and the unit amount in column 3 is 50, then the unit cost in column 4 is \$500 (\$25,000 divided by 50 = \$500).

## C. Explanation for determining Unit Cost per Core Measure.

Briefly explain, in the space below, the rationale and methodology used to determine the Unit Amount per Core Measure (column 3) and the Grant Budget per Core Measure (column 2) for each Core Measure selected. This explanation should be consistent with the expenditures on the DOE 101, Budget Narrative Form.

**Example:** *If the Grant Budget per Core Measure for secondary school diplomas or passing the GED tests represents a substantial portion of the total budget, then a similar proportion of the total budget expenses reflected on the DOE 101 would support this goal.*

Box will expand when text is typed.

## DEFINITIONS

### Primary Core Measures

#### 1. Educational Gains\*

Demonstrate improvements in literacy skill levels in any of the following: reading, writing and speaking in the English language, numeracy, problem-solving, English language acquisition, and other literacy skills.

NRS reporting requires that the learner completes or advances one or more educational functioning level(s) from starting level measured on entry into the program.

*\*An educational gain is defined by the state of Florida as attainment of a literacy completion point (LCP). **Gains must be validated through the use of an NRS approved assessment instrument.***

Demonstrate improvements in literacy skill levels in any of the following: reading, writing and speaking in the English language, numeracy, problem-solving, English language acquisition, and other literacy skills. Learner completes or advances one or more educational functioning level(s) from starting level measured on entry into the program.

*\*An educational gain is defined by the state of Florida as attainment of a literacy completion point (LCP). **Gains must be validated through the use of an NRS approved assessment instrument.***

#### 2. Placement, Retention and Completion

Placement in, retention in, or completion of postsecondary education, unsubsidized employment or career advancement.

#### 3. Receipt of secondary school diploma or its recognized equivalent -- GED

# PERFORMANCE-BASED PROJECT DELIVERABLES FORM

## Instructions for completing Section D:

For each Core Measure provided by this project (see previous page), please place a checkmark in the appropriate box(es).

## D. Explanation of Deliverables

<b>Adult Education</b>	
<b>X</b>	<b>1. Educational Gains</b> (All applications must address this measure.)  List of students including: <ol style="list-style-type: none"><li>1. name and student identification number</li><li>2. educational level pre/post test scores</li></ol>
	<b>2. Placement, Retention, Completion</b> List of students including: <ol style="list-style-type: none"><li>1. name and student identification number</li><li>2. type of placement, retention or completion</li></ol>
	<b>3. Secondary High School Diploma/GED</b> List of students including: <ol style="list-style-type: none"><li>1. name and student identification number</li><li>2. for GEDs include GED identification number</li><li>3. for secondary high school diplomas include county of issuance</li></ol>

# INVOICE SCHEDULE

**This form is to be completed by applicants required to invoice for performance-based deliverables, such as Community-Based Organizations (CBOs).**

Agency Name: \_\_\_\_\_

<b>Invoice # 1</b>			
<b>Projected Due Date:</b> _____			
<b>Primary Core Measures</b>	<b>Units per Core Measure</b>	<b>Amount</b>	<b>Unit Cost per Core Measure</b>
1. Educational Gains		\$	\$
2. Placement, Retention, Completion		\$	\$
3. Secondary Diploma/GED		\$	\$
<b>Invoice # 2</b>			
<b>Projected Due Date:</b> _____			
<b>Primary Core Measures</b>	<b>Units per Core Measure</b>	<b>Amount</b>	<b>Unit Cost per Core Measure</b>
1. Educational Gains		\$	\$
2. Placement, Retention, Completion		\$	\$
3. Secondary Diploma/GED		\$	\$
<b>Invoice # 3</b>			
<b>Projected Due Date:</b> _____			
<b>Primary Core Measures</b>	<b>Units per Core Measure</b>	<b>Amount</b>	<b>Unit Cost per Core Measure</b>
1. Educational Gains		\$	\$
2. Placement, Retention, Completion		\$	\$
3. Secondary Diploma/GED		\$	\$
<b>Invoice # 4</b>			
<b>Projected Due Date:</b> _____			
<b>Primary Core Measures</b>	<b>Units per Core Measure</b>	<b>Amount</b>	<b>Unit Cost per Core Measure</b>
1. Educational Gains		\$	\$
2. Placement, Retention, Completion		\$	\$
3. Secondary Diploma/GED		\$	\$
<b>Invoice # 5</b>			
<b>Projected Due Date:</b> _____			
<b>Primary Core Measures</b>	<b>Units per Core Measure</b>	<b>Amount</b>	<b>Unit Cost per Core Measure</b>
1. Educational Gains		\$	\$
2. Placement, Retention, Completion		\$	\$
3. Secondary Diploma/GED		\$	\$

<b>Invoice # 6</b>		<b>Projected Due Date: _____</b>					
<b>Primary Core Measures</b>	<b>Units per Core Measure</b>			<b>Amount</b>		<b>Unit Cost per Core Measure</b>	
1. Educational Gains				\$		\$	
2. Placement, Retention, Completion				\$		\$	
3. Secondary Diploma/GED				\$		\$	
	<b>Invoice #1</b>	<b>Invoice #2</b>	<b>Invoice #3</b>	<b>Invoice #4</b>	<b>Invoice #5</b>	<b>Invoice #6</b>	<b>Totals</b>
<b>Units per Core Measure</b>							
<b>Amount</b>							
<b>Invoice Date</b>							

**Instructions for completing Invoice Schedule:**

Enrollment figures for each invoice should be the total number of enrollments (for each applicable core measure) to be achieved by the projected invoice date.

The number of invoices is at the discretion of the applicant. Applicants who intend to invoice only twice during the project period will complete the form indicating only two invoices. Applicants who intend to invoice more than six times during the project period may duplicate the form for a total of 12 invoices.

## Grants Administration Contacts

<b>Grants Administration Director</b>  <b>Gloria Spradley-Brown</b> <a href="mailto:Gloria.Spradley@fldoe.org">Gloria.Spradley@fldoe.org</a> 850/245-9053	<b>West Team Director</b>  <b>Teresa Bestor</b> <a href="mailto:Teresa.Bestor@fldoe.org">Teresa.Bestor@fldoe.org</a> 850/245-9047	<b>East Team Director</b>  <b>Ike Gibson</b> <a href="mailto:Ike.Gibson@fldoe.org">Ike.Gibson@fldoe.org</a> 850/245-9026
<b>Special Projects</b>  <b>Leatrice Williams</b> <a href="mailto:Leatrice.Williams@fldoe.org">Leatrice.Williams@fldoe.org</a> 850/245-9902	<b>Grants and Contracts</b>  <b>Linda Meadows</b> <a href="mailto:Linda.Meadows@fldoe.org">Linda.Meadows@fldoe.org</a> 850/245-9043	<b>Administrative Secretaries</b>  <b>Renaee Kelly</b> 850/245-9901 <b>Locester Presha</b> 850/245-9046 <b>Connie Rowan</b> 850/245-9048

## Program Managers/Counties

West Team	West Team	West Team	West Team
<b>Ken Plummer</b> <a href="mailto:Ken.Plummer@fldoe.org">Ken.Plummer@fldoe.org</a> 850/245-9042  Bay Calhoun Escambia Gulf Holmes Jackson Okaloosa Santa Rosa Walton Washington Franklin Gadsden Leon Liberty Wakulla	<b>Leslie Young</b> <a href="mailto:Leslie.Young@fldoe.org">Leslie.Young@fldoe.org</a> 850/245-9040  Charlotte Collier De Soto Glades Hardee Hendry Highlands Lee Manatee Sarasota	<b>Lyle Richmond</b> <a href="mailto:Lyle.Richmond@fldoe.org">Lyle.Richmond@fldoe.org</a> 850/245-9045  Hernando Hillsborough Pasco Pinellas Polk	<b>Lani Lingo</b> <a href="mailto:Lani.Lingo@fldoe.org">Lani.Lingo@fldoe.org</a> 850/245-9044  Alachua Baker Bradford Columbia Dixie Duval Gilchrist Hamilton Jefferson Lafayette Madison Nassau Suwannee Taylor Union
East Team	East Team	East Team	
<b>Ila Waite-Burns</b> <a href="mailto:Ila.Waite-Burns@fldoe.org">Ila.Waite-Burns@fldoe.org</a> 850/245-9066  Broward Miami-Dade Monroe Palm Beach	<b>Bev Kilmer</b> <a href="mailto:Bev.Kilmer@fldoe.org">Bev.Kilmer@fldoe.org</a> 850/245-9037  Brevard Indian River Martin Okeechobee Orange Osceola Seminole St. Lucie	<b>Ted Lane</b> <a href="mailto:Ted.Lane@fldoe.org">Ted.Lane@fldoe.org</a> 850/245-9041  Citrus Clay Flagler Lake Levy Marion Putman St. Johns Sumter Volusia	

**Senior Adult Learner  
Fiscal Year 2005-2006**

**APPLICATION REVIEW CRITERIA AND CHECKLIST**

- Include this form in the application package.
- Place all items requested in the order indicated below.
- Include only the items requested.
- Place page numbers on every page consecutively, at the bottom, beginning with the DOE 100A as page 1. Page numbers written by hand are permissible if electronic numbering is a problem.
- Staple upper left corner of the complete application package (no spiral bindings, notebooks or cover pages, please).

Place in the following order	Item	Applicant Indicate Page Numbers Below	DOE Staff	
			✓ Check appropriate box below	
			Complete	Incomplete
<b>1</b>	DOE 100A, Project Application – with original signature			
<b>2</b>	DOE 101, Budget Narrative Form			
<b>3</b>	Performance-Based Project Deliverables Form			
<b>4</b>	Invoice Schedule Form – if applicable			
<b>5</b>	Narrative Section - <b>three page maximum</b>			
	GEPA			
	Project Design = Self-assessment Evaluation Form -- <b>do not</b> count in three page maximum			
	Strategic Imperatives			
	Dissemination/Marketing			
<b>6</b>	Regional Workforce Board Coordination Assurance Form			
<b>7</b>	Application Review Criteria and Checklist			
<b>8</b>	<b>Community-Based Organizations</b> – must include the following:			
	• List of current Board of Directors and Articles of Incorporation			
	• Copy of current operating budget			
	• Copy of current audit report – if available			
	• Copy of Chart of Accounts			
	• General Terms, Assurances and Conditions for Participation in Federal and State Programs			
	• Proof of eligibility to operate a business in Florida (signed document from Florida Secretary of State)			

**Continued on next page**

**DOE Grants Administration staff use ONLY**

Does the agency need to be contacted? \_\_\_\_ yes \_\_\_\_no

Person contacted: \_\_\_\_\_ Date: \_\_\_\_\_

If contact is necessary, explain:

Signature of Program Manager \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Supervisor \_\_\_\_\_ Date: \_\_\_\_\_

***Comments:***

**Include this page in Application Package**