



APPLICATION FOR MIGRANT EDUCATION GRANT

DEPARTMENT OF PUBLIC INSTRUCTION

TITLE I

SFN 19693 (Rev. 02/2015)

RETURN TO:

Department of Public Instruction

Federal Title Program Office

600 E Boulevard Avenue, Dept. 201

Bismarck, ND 58505-0440

Fax: (701) 328-0203

ME-1

Complete this page including the signature and date.

Applicant (Legal Name of Agency)		School Year	
Name of Authorized Representative		Telephone Number	
Contact Person (If other than Authorized Representative)		Telephone No.	
Mailing Address	City	State	Zip Code

The applicant hereby applies for a grant of Federal funds to provide instructional activities and services to meet the special educational needs of educationally deprived children as set forth in this application.

The School Board has reviewed this project application at its meeting held on _____, _____ and authorizes me as its representative to file this application. Such action is recorded in the minutes of that meeting. If this application is approved, the grant funds will be expended in compliance with the applicable Federal laws and regulations.

Signature of Authorized Representative	Date Signed
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For Department Use Only

Signature of Authorized SEA Official		Total Requested
Beginning Date	Ending Date	
Date Received	Date Approved	Amount Approved

Migrant Education Assurances

The Applicant Hereby Assures the Following:

The local educational agency will keep such records and provide such information to the state educational agency as may be required for fiscal audit and program evaluation, and the programs and projects described –

- (1) are located in attendance areas of an agency which have uniformly high concentrations of such children;
- (2) are of sufficient size, scope and quality to give reasonable promise of substantial progress toward meeting the special educational needs of the children being served; and target services on reading, math and overcome barriers to graduation.
- (3) will establish a local parent advisory committee (PAC) which is consulted in the design, implementation and evaluation of the project;
- (4) will maintain, update and transfer student records utilizing the various methods outlined in this application.

The recipient of federal funds assures compliance with the North Dakota Department of Public Instruction.

I HEREBY CERTIFY that I have read the above assurances and to the best of my knowledge, the information contained in this plan is correct.

Signature of Authorized Representative	Date
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**Food service costs are not a budgeted expense in the Title I Migrant Education Program. All food service costs are administered by the USDA Food Service Program. Therefore, reimbursement for food service shortages will be considered on an individual program basis. No Migrant Summer Schools will be guaranteed any reimbursement for food shortages through the North Dakota Migrant Education Program.*

Migrant Education Program Description

List below the objectives, activities, and evaluation procedures your site has for your Migrant Education program.

Objectives <i>(Must support state plan objectives and must be stated in measurable terms)</i>	Activities	Evaluation <i>(Procedures to measure Gains/Outcomes)</i>

Migrant Education Program Description (continued)

Indicate the organizational pattern you plan to use. Check at least one per section.

Elementary	Secondary	
<input type="checkbox"/>	<input type="checkbox"/>	A. (1) Pupils instructed individually
<input type="checkbox"/>	<input type="checkbox"/>	(2) Pupils instructed in groups
<input type="checkbox"/>	<input type="checkbox"/>	B. (1) Services provided in regular classroom
<input type="checkbox"/>	<input type="checkbox"/>	(2) Services provided outside regular classroom
<input type="checkbox"/>	<input type="checkbox"/>	C. (1) Migrant teacher instructs exclusively
<input type="checkbox"/>	<input type="checkbox"/>	(2) Migrant teacher instructed with assistance of aide(s)
<input type="checkbox"/>	<input type="checkbox"/>	(3) Other (Specify)

Check the alternatives you plan to use to measure migrant student advanced skills in reading, mathematics, and language arts.

<input type="checkbox"/>	Standardized test scores, e.g., scores in reading, comprehension, math problem-solving, etc.
<input type="checkbox"/>	Teacher-made test scores
<input type="checkbox"/>	Regular classroom grades in reading, English, math or other curricular subjects, e.g., science, social studies, etc.
<input type="checkbox"/>	Participation in advanced coursework, e.g., gifted and talented, honors classes, advanced placement, etc.
<input type="checkbox"/>	Participation in extra-curricular activities, e.g., debate, drama, etc.
<input type="checkbox"/>	Honors and awards, e.g., scholarships, recognition for achievement, acceptance to college, college entrance test scores, National Merit, etc.
<input type="checkbox"/>	Other (specify)

Indicate the largest number of pupils during any migrant class period a migrant teacher will have.

If there will be more than one grade in a classroom, list which grades will be served together.

Migrant Education Program Description (continued)

Check the items you plan to use in the diagnosis of pupil deficiencies.

Check the types of materials, supplies and equipment you plan to use to instruct pupils in areas of need.

	Elem.	Sec.		Elem.	Sec.
Formal Inventories	<input type="checkbox"/>	<input type="checkbox"/>	Textbooks	<input type="checkbox"/>	<input type="checkbox"/>
Informal Inventories	<input type="checkbox"/>	<input type="checkbox"/>	Books Other Than Textbooks	<input type="checkbox"/>	<input type="checkbox"/>
Diagnostic Test	<input type="checkbox"/>	<input type="checkbox"/>	Printed Materials Other Than Books	<input type="checkbox"/>	<input type="checkbox"/>
Attitude Surveys	<input type="checkbox"/>	<input type="checkbox"/>	Commercial Games	<input type="checkbox"/>	<input type="checkbox"/>
Individual Pupil Interviews	<input type="checkbox"/>	<input type="checkbox"/>	Parent and/or Teacher-Prepared Games	<input type="checkbox"/>	<input type="checkbox"/>
Staffing	<input type="checkbox"/>	<input type="checkbox"/>	Machines That Teach (Other Than Computers)	<input type="checkbox"/>	<input type="checkbox"/>
Criterion-Referenced Tests	<input type="checkbox"/>	<input type="checkbox"/>	Audio-Visual Equipment	<input type="checkbox"/>	<input type="checkbox"/>
Tests of Auditory Deficiency	<input type="checkbox"/>	<input type="checkbox"/>	Manipulatives and Models	<input type="checkbox"/>	<input type="checkbox"/>
Tests of Visual Deficiency	<input type="checkbox"/>	<input type="checkbox"/>	Art Materials for Subject-Related Projects	<input type="checkbox"/>	<input type="checkbox"/>
Tests of Speaking Deficiency	<input type="checkbox"/>	<input type="checkbox"/>	Drama Materials	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify)	<input type="checkbox"/>	<input type="checkbox"/>	Bilingual Materials	<input type="checkbox"/>	<input type="checkbox"/>
			Other (Specify)	<input type="checkbox"/>	<input type="checkbox"/>

Migrant Education Program Staff Assignments and Personnel Report

Staff Member	Assignment	No. of Hours Per Week Employed	No. of Weeks Employed	Rate of Pay Per Hour	Salary Paid by Migrant Education	Employee Benefits
Totals						

The total on this page must match object (100) & (200) on the budget page of your application.

Equipment – Only items with a value of \$750 or more

Name of Item	Quantity Requested	Total Cost
Total		

Justification for Equipment

Other Services

Provide a brief description of your local P.A.S.S. Program.

Provide a brief description of your local E.S.S.M.S. Program.

Provide a brief description of support services provided (nutrition, busing) etc.

Identification and Recruitment

Describe the strategy for identifying & recruiting all eligible migratory children in your service area. List recruiter's responsibilities; include follow-up, home and field visits. (attach additional sheets, if necessary)

Coordination

Describe how the project will coordinate with other agencies to make use of all services available to migratory children. (attach additional sheets, if necessary.)

Records Transfer

Explain in detail how the LEA will maintain, update, and transfer student records utilizing the following methods.

(1) (Copies of all student records are to be inserted in a folder at close of program. Sites must maintain copies.)
(2) Fax/Phone (if needed)
(3) Mail (if needed)
(4) The Migrant Student Information Exchange System (MSIX)

Parent Involvement

Briefly describe your procedure for establishing the Parent Advisory Council (PAC).
Briefly describe how the PAC is consulted in the planning, operation, and evaluation of the LEA program.
Submit Student Discipline Procedures. (attach additional sheets, if necessary)

MIGRANT EDUCATION PROGRAM PROPOSED BUDGET

Object Number		Title I Total	E.S.S.M.S	P.A.S.S.	Title I Grand Total Requested	DPI Amount Approved
100	Personal Services Salaries	(110) Professional (Teachers)				
		(120) Technical Ancillary (All Other)				
200	Personal Services – Employee Benefits including Worker’s Compensation					
400	(water, phone, garbage & electricity)			Pool		
				Phone		
500	(Travel) E.S.S.M.S, P.A.S.S., and workshop					
600	Supplies, Food Overage & Materials (including cleaning supplies and telephone)			Curriculum Fees		
				Supplies		
700	Equipment		N/A	N/A		
800	Other objects Pupil Transportation					
	Tri-Valley Share					
	Title I Migrant Education Share					
	Total of Both Requested					
900	Other uses of funds – indirect cost %_____					
Total						

Buses W/42 Passengers \$2.15 Per Mile

Buses W/20-41 Passengers \$ 1.40 Per Mile

Cars \$.57.5 Per Mile