**Kentucky Department of Education**

**Nita M. Lowey 21st Century Community Learning Program**

 **Continuation Progress Report**

Eligibility for Continued Funds: **As authorized under Every Student Succeeds Act (ESSA), Title IV, Part B, the Kentucky Department of Education awarded the 21st Century Community Learning Centers Grant to your school district and/or community or faith-based organization for the intent to implement effective out of school programs that improve student achievement and social development.**

As indicated upon the receipt of the grant award, each grant would be reviewed in the third year by KDE to determine eligibility for the additional two years of continued funding. Programs must maintain the original level of programs/services to at least the same number of students served in the first three years of grant funding. The program guidelines and criteria to receive the funds remain the same as originally approved.

**New Grants - 4th year funding will be $125,000 and 5th-year funding will be $100,000**

**Continuation/Expansion Grants – 4th year funding will be $95,000 and 5th-year funding will be $95,000**

***Please complete and submit the report to the KDE consultant no later than March 31, 2025***

 **Region 1 and 2:** **Tammy Cash**  **/ Regions 3 and 5:** Leslie Spears **/ Regions 4, 6, and 7:** Glenna Cummins

 **(FOR KDE USE ONLY) KDE consultant / Date of Approval:**

**Date Submitted:** Click or tap to enter a date.

**Grant Cycle:** Click here to enter text.

**Grant Type:** Choose an item.

**Fiscal Agent:** Click here to enter text.

**Co-applicant:** Click here to enter text.

**School(s) Served:** Click here to enter text.

**Physical Address:** Click here to enter text.

**district:** Click here to enter text.

**Site Coordinator:** Click here to enter text.

**Program Director:** Click here to enter text.

**# OF REGULAR ATTENDEES:** Click here to enter text.

**# OF DAILY ATTENDEES:** Click here to enter text.

**Name of Staff Member Submitting Report:** Click here to enter text.

**E-mail/Phone:** Click here to enter text.

## **Program Summary**

The purpose of this report is to show progress made in the first three years of the 21st CCLC program under full funding and to present your sustainability plan for years four and five. **NOTE:** This is **not** a grant application.

Describe the first three years of 21st CCLC programming. Include types of programming, enrichment activities, community involvement, etc. If this is an expansion grant, please describe how funds have been utilized to serve more students.

* Click here to enter text.

## **Collaboration Overview**

Describe the partnership between the program and the co-applicant reflected in the current grant proposal. Discuss how other partners have worked with the program in the first three years, the services they provide, and their plan for ongoing support to help sustain programming in the fourth and fifth years.

* Click here to enter text.

## **Evaluation and Assessment**

Include hard data that resulted in program change and student progress. Data should include monitoring reports (desk, on-site, and summer), CEEP data from the past three years, federal, state, or local data (test scores, grades, etc.), and surveys (parents, teachers, students, stakeholders, etc.). Describe how and when program data is reviewed and explain how it has impacted the grant's implementation.

* Click here to enter text.

## **Sustainability Plan (Attach a detailed copy)**

Please provide a sustainability plan developed to ensure that the program will be sustained beyond the fifth year of funding. A good plan is a living document regularly reviewed and updated to meet the needs of the students/families served through the 21st CCLC initiative. Include in-kind contributions, additional grants, and collaboration with district programs and/or the community. (The summary submitted in the grant application is not considered a complete sustainability plan.)

## **Inventory List (Attach copy)**

***Attach a copy of the program inventory list for the last three years.***

## **Program Performance Goals and Performance Indicators (objectives) (from current grant)**

1. Type each objective related to the goal.
2. Select the status for each objective from the drop-down box.
3. Explain why each objective was met or not met.
4. If the objective was not met, explain how it will be addressed in years four and five.

### **Goal 1: Increase academic achievement of regularly participating students.**

**Objective 1:** Click here to enter text.

**Status of objective 1:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms, the progress made toward meeting this objective in the past three years. The description may include baseline data, current achievement data, grades, internal assessment (MAP, STAR, IXL, etc.), CEEP, ACT, and/or other data that will demonstrate progress. Provide a summary of the activities implemented to address this objective(s).

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

**Objective 2:** Click here to enter text.

**Status of objective 2:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms, the progress made toward meeting this objective in the past three years. The description may include baseline data, current achievement data, grades, internal assessment (MAP, STAR, IXL, etc.), CEEP, ACT, and/or other data that will demonstrate progress. Provide a summary of the activities implemented to address this objective(s).

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

### **Goal 2: improve non-cognitive indicators of success in regularly participating students.**

**Objective 1:** Click here to enter text.

**Status of objective 1:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description should compare baseline data to current data, discipline, attendance, failure rate, graduation rate, number of counseling referrals, and/or any other non-cognitive data. Provide a summary of the activities implemented to address this objective(s).

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

**Objective 2:** Click here to enter text.

**Status of objective 2:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description should compare baseline data to current data, discipline, attendance, failure rate, graduation rate, number of counseling referrals, and/or any other non-cognitive data. Provide a summary of the activities implemented to address this objective(s).

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

### **Goal 3: increase the number of students attending 30-days or more during the academic year.**

**Objective 1:** Click here to enter text.

**Status of objective 1:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description may include the number of regular attendees each year, retention of students, examples of programs/activities offered, survey results, parent involvement, and any other data available.

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

**Objective 2:** Click here to enter text.

**Status of objective 2:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description may include the number of regular attendees each year, retention of students, examples of programs/activities offered, survey results, parent involvement, and any other data available.

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

### **Goal 4: increase access to high-quality programming.**

**Objective 1:** Click here to enter text.

**Status of objective 1:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description may include days/hours of programming each week, number of certified teachers (and hours) working in the program, other high-quality staffing, number of students attending morning/afternoon/summer programming, linkages to the school day, transportation, and any other information that demonstrates access to high-quality programming.

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

**Objective 2:** Click here to enter text.

**Status of objective 2:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description may include days/hours of programming each week, number of certified teachers (and hours) working in the program, number of students attending morning/afternoon/summer programming, linkages to the school day, transportation, and any other information that demonstrates access to high-quality programming.

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

### **Goal 5: increase access to college/career preparation for middle/high school students and increase awareness for elementary.**

**Objective 1:** Click here to enter text.

**Status of objective 1:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description may include the number of students participating in college and/or technical school visits, guest speakers, field trips, ACT prep, ILP, number of career-related activities, dual credit, and any other activities and/or data to support this objective.

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

**Objective 2:** Click here to enter text.

**Status of objective 2:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description may include the number of students participating in college and/or technical school visits, guest speakers, field trips, ACT prep, ILP, number of career-related activities, dual credit, and any other activities and/or data to support this objective.

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

### **Goal 6: increase educational opportunities for parents and families that support academic achievement.**

**Objective 1:** Click here to enter text.

**Status of objective 1:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description may include a summary (and number) of adult skill-building activities, the number of parents/family members in attendance for each activity, parent survey results, how parents are contacted/informed about these events, and or any other information to support this objective.

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

**Objective 2:** Click here to enter text.

**Status of objective 2:** Choose an item.

**Explain why the objective was or was not met:**

Describe in measurable terms the progress toward meeting this objective in the past three years. The description may include a summary (and number) of adult skill-building activities, the number of parents/family members in attendance for each activity, parent survey results, how parents are contacted/informed about these events, and or any other information to support this objective.

Click here to enter text.

**If the objective was not met, explain how it will be addressed in years four and five.** Click here to enter text.

## **Additional Performance Goals and Performance Indicators (if needed)**

Click here to enter text.

## **Budget Summary**

| **Budget Category** | **Year Four****(2024-2025 School Year)****Amount Requested** | **Year Four** **(2024-2025 School Year)****In-Kind (Optional)** | **Year Five****(2025-2026 School Year)****Amount Requested** | **Year Five** **(2025-2026 School Year)****In-Kind (Optional)** |
| --- | --- | --- | --- | --- |
| **Personnel** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Fringe Benefits** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Travel (Staff)** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Equipment** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Supplies/Materials** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Summer Programming** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Contractual** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Indirect Cost** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Transportation** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Other** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Volunteers**  | **Not Applicable** | Click here to enter text. | **Not Applicable** | Click here to enter text. |
| **Sub Totals** | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| **Total Grant** **Funds Requested****as identified in the grant application****(Do not include in-kind)** | **(Year Four)**Click here to enter text. | **(Year Five)**Click here to enter text. |

***\*NOTE: Please make sure the budget totals in your CPR are correct.***

***\*NOTE: Grant funds cannot be used to purchase facilities or support new construction.***

1. **Budget Narrative – Year Four**

Develop a budget that includes school year **and** summer programming for each category.

1. **Personnel**

List the number/position of full and part-time staff to be employed with grant funds and estimate the salary for each. If paid a daily rate, multiply the rate by the number of days for each staff person.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Personnel Costs:** Click here to enter text. |
| --- |

1. **Fringe Benefits**

List benefit(s) + estimated cost or portion of the cost for each staff person employed through the grant = Total Fringe Benefits Costs.

 School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Fringe Benefits Costs:** Click here to enter text. |
| --- |

1. **Travel (Staff)**

**In state** – you must allocate funds(lodging, meals, and mileage at your district rate) for at least two project staff to attend the following: Multi-State Conference (three days), Spring Statewide Training (two days), and the Cayen Aplus Data Training (one day). Itemize expenditures separately for each training.

School Year: Click here to enter text.

Summer programming: Click here to enter text.

| **Total Travel Costs:** Click here to enter text. |
| --- |

1. **Equipment**

Itemize items and the cost of each.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Equipment Costs:** Click here to enter text. |
| --- |

1. **Supplies/Materials**

Itemize items and the cost of each.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Supplies/Materials Costs:** Click here to enter text. |
| --- |

1. **Contractual**

Itemize contractual fees.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Contractual Costs:** Click here to enter text. |
| --- |

1. **Indirect Cost**

Itemize administrative expenses.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Indirect Costs:** Click here to enter text. |
| --- |

1. **Transportation (Program)**

Estimate mileage costs and include related costs such as bus rental, bus drivers (if not included under personnel), field trips, etc.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Transportation Costs:** Click here to enter text. |
| --- |

1. **Other**

Specify and itemize.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total “Other” Costs:** Click here to enter text. |
| --- |

## **Budget Narrative – Year Five**

Develop a budget that includes school year **and** summer programming for each category.

1. **Personnel**

List the number/position of full and part-time staff to be employed with grant funds and estimate the salary for each. If paid a daily rate, multiply the rate by the number of days for each staff person.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Personnel Costs:** Click here to enter text. |
| --- |

1. **Fringe Benefits**

List benefit(s) + estimated cost or portion of the cost for each staff person employed through the grant = Total Fringe Benefits Costs.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Fringe Benefits Costs:** Click here to enter text. |
| --- |

1. **Travel (Staff)**

**In state** – you must allocate funds(lodging, meals, and mileage at your district rate) for at least two project staff to attend the following: Multi-State Conference (three days), Spring Statewide Training (two days), and the Cayen Aplus Data Training (one day). Itemize expenditures separately for each training.

School Year: Click here to enter text.

Summer programming: Click here to enter text.

| **Total Travel Costs:** Click here to enter text. |
| --- |

1. **Equipment**

Itemize items and the cost of each.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Equipment Costs:** Click here to enter text. |
| --- |

1. **Supplies/Materials**

Itemize items and the cost of each.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Supplies/Materials Costs:** Click here to enter text. |
| --- |

1. **Contractual**

Itemize contractual fees.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Contractual Costs:** Click here to enter text. |
| --- |

1. **Indirect Cost**

Itemize administrative expenses.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Indirect Costs:** Click here to enter text. |
| --- |

1. **Transportation (Program)**

Estimate mileage costs and include related costs such as bus rental, bus drivers (if not included under personnel), field trips, etc.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total Transportation Costs:** Click here to enter text. |
| --- |

1. **Other**

Specify and itemize.

School Year: Click here to enter text.

Summer Programming: Click here to enter text.

| **Total “Other” Costs:** Click here to enter text. |
| --- |