

ARP-Homeless Children and Youth (HCY) Part II Application - ARP Homeless II

Introduction/Instructions - Summary & Background

American Rescue Plan (ARP) - Homeless Children and Youth (HCY) Part II Application

--Entity Name-- --Institution BEDS Code--

Summary & Background

ARP-Homeless Children and Youth (HCY) Part II Application - ARP Homeless II

Introduction/Instructions - Summary & Background

providing store cards/prepaid debit cards to purchase materials necessary for students to participate in school activities.

Consortiums

LEAs with allocations of less than \$5,000 will need to apply for ARP-HCY II funding as part of a consortium. Each consortium will identify a Lead Applicant who will be responsible for submitting a comprehensive application that includes a listing of all members of the consortium, and provides a program narrative and a budget that meets the needs of the consortium as a whole.

A consortium Member will need to complete a brief application, which includes agreeing to the assurances for the grant, identification of the LEA's McKinney-Vento Liaison, and acknowledgement of the Lead Applicant for the consortium.

LEAs with allocations greater than \$5,000 that are not participating in a consortium (Single Applicants) will complete a comprehensive application that includes a program narrative and a budget.

Project Period

March 13, 2020 to September 30, 2024.

Project Number

The project number stem for the program is:

5218-22-XXXX

This number should be used on the FS-10 budget form.

Submission Deadline

Completed applications are due by **March 31, 2022** (with extensions by request), and will be reviewed on a rolling basis.

ARP-Homeless Children and Youth (HCY) Part II Application - ARP Homeless II

Introduction/Instructions - Contact Information

Contact Information

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ARP-Homeless Children and Youth (HCY) Part II Application - ARP Homeless II

Introduction/Instructions - Assurances

13.



ARP-Homeless Children and Youth (HCY) Part II Application - ARP Homeless II

ARP-HCY Application - Intent to Apply

Intent to Apply

LEAs with allocations of less than \$5,000 will need to apply for ARP-HCY II funding as part of a consortium. Each consortium will identify a Lead Applicant who will be responsible for submitting a comprehensive application that includes a listing of all members of the consortium, and provides a program narrative and a budget that meets the needs of the consortium as a whole.

A consortium Member will need to complete a brief application, which includes agreeing to the assurances for the grant, identification of the LEA's McKinney Vento Liaison, and acknowledgement of the Lead Applicant for the consortium.

LEAs with allocations greater than \$5,000 that are not participating in a consortium (Single Applicants) will complete a comprehensive application that includes a program narrative and a budget.

1. Does the LEA intend to apply for American Rescue Plan (ARP) Act - Homeless Children and Youth (HCY) Part II funding?

Yes, the LEA intends to apply for the American Rescue Plan (ARP) Act - Homeless Children and Youth (HCY) Part II funding.

No, the LEA did not receive an allocation for the American Rescue Plan (ARP) Act - Homeless Children and Youth (HCY) Part II funding.

No, the LEA received an allocation for the American Rescue Plan (ARP) Act - Homeless Children and Youth (HCY) Part II funding but does not intend to apply for it.

2. How does the LEA intend to access its ARP-HCY Part II funds?

- The LEA receives an allocation greater than or equal to \$5,000 and intends to apply for its ARP-HCY Part II funds as a SINGLE APPLICANT.
- The LEA intends to apply for its ARP-HCY Part II funds as a MEMBER of a consortium.
- The LEA intends to apply for its ARP-HCY Part II funds as the LEAD APPLICANT of a consortium.
- None of the Above

ARP-Homeless Children and Youth (HCY) Part II Application - ARP Homeless II

ARP-HCY Application - Consortium MEMBER

Consortium MEMBER

1. **Please provide the Name of the LEAD APPLICANT of the consortium the LEA intends to join and the BEDS number of that entity.**

	Name of Consortium LEAD APPLICANT	BEDS of Consortium LEAD APPLICANT
LEAD APPLICANT of Consortium		

2. **Please provide the Allocation of the MEMBER of the consortium and the number of its homeless students.**

	Allocation of MEMBER (\$)	Homeless Students of MEMBER (#)	Per Pupil Amount of MEMBER (\$)
MEMBER of Consortium			

3. **I agree to be part of a shared services consortium with the consortium lead named above for the provision of services to English Language Learners under the American Rescue Plan Act of 2021 (ARP). I hereby assure the**



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ARP-HCY Application - Consortium LEAD APPLICANT

Consortium LEAD APPLICANT

1. **Please complete the following chart by providing up-to-date contact information for the individual within the LEA/charter school responsible for the ARP-Homeless Children and Youth (HCY) Part II application and grant.**

	Contact Person	Contact Phone Number	Contact Email Address
Consortium Lead Applicant			

2. **Please provide the name, BEDS number, allocation and homeless student count of**

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ARP-Homeless Children and Youth (HCY) Part II Application - ARP Homeless II

ARP-HCY Application - LEAD APPLICANT - Budget & Narrative

LEAD APPLICANT - Budget & Narrative

1. Please upload a completed and signed copy of the FS-10 Budget for the American Rescue Plan (ARP) - Homeless Children and Youth (HCY) Part II fund for the entire consortium.
2. Please upload a completed copy of the Budget Narrative for the American Rescue Plan (ARP) - Homeless Children and Youth (HCY) Part II fund for the entire consortium.
3. Please complete the following table by providing total proposed expenditures for the entire consortium by budget code for funding in relation to the American Rescue Plan (ARP) - Homeless Children and Youth (HCY) Part II fund. This information should match the Budget Summary page of the FS-10 budget form.

	Total Funds (\$)
15 - Professional Salaries	
16 - Support Staff Salaries	
40 - Purchased Services	
45 - Supplies and Materials	
46 - Travel Expenses	
80 - Employee Benefits	
90 - Indirect Cost	
49 - BOCES Services	
30 - Minor Remodeling	
20 - Equipment	
Totals:	0

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ARP-HCY Application - Funding SINGLE APPLICANT

Funding SINGLE APPLICANT

--Entity Name-- --Institution BEDS Code--

1. Please complete the chart below by providing the LEA's Homeless Children and Youth (HCY) Part II allocation, as well as the number of students and youth experiencing homelessness enrolled in LEA.
Please Note - an LEA must have an allocation of \$5,000 or more to apply as a SINGLE APPLICANT.

	Allocation (\$)	Homeless Students (#)	Per Pupil Amount (\$)
Single Applicant Information			

Program Narrative

2. In the space provided below, please describe the extraordinary impact of the pandemic on students experiencing homelessness, including academic, social, emotional, and mental health needs.

3. In the space provided below, please describe how the LEA intends to use ARP-HCY Part II funds to address the needs identified in #1 above, including, but not limited to activities intended to:

- Increase capacity by hiring staff, dedicating resources, and planning partnerships with community-based organizations, among other strategies;
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