

**Families, Education, Preschool and Promise Levy**

**Summer Learning Enhancement Request for Investment**

**Application Submission Template**

**COVER SHEET**

**Summer Learning Enhancement**

**Request for Investment Application**

|  |  |
| --- | --- |
| Organization Name |  |
| Organization Leader  (e.g. Executive Director) |  |
| Mailing Address |  |
| Email Address |  |
| Contact Phone |  |
| Organization URL |  |

**ORGANIZATION CONTACT INFORMATION:**

**APPLICANT CONTACT INFORMATION:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Primary** Contact Person Name |  | **Secondary** Contact Person Name |  |
| Title/Role |  | Title/Role |  |
| Phone |  | Phone |  |
| Email |  | Email |  |

**All applicants are required to complete an online** [**registration**](https://forms.office.com/Pages/ResponsePage.aspx?id=RR7meOtrCUCPmTWdi1T0GyvpsrT90QdNsFc0qVLq7ZNUMURYSzROUjZLR0gxTkJFR1I0TzBZQ1BZNi4u) **form for each application they submit.** Upon completion of the registration form you will receive an email confirmation.

Check the box below to confirm your organization has submitted the online registration form.

Yes, my organization has completed the online registration form

**AUTHORIZED SIGNATURE OF LEAD ORGANIZATION APPLICANT:**

*To the best of my knowledge and belief, all information in this application is true and correct. The document has been duly authorized by the governing body of the applicant who will comply with all contractual obligations if the applicant is awarded funding.*

|  |  |  |
| --- | --- | --- |
| Name and Title of Authorized Representative: |  | |
|  | |  |
| *Signature of Authorized Representative* | | *Date* |

**AUTHORIZED SIGNATURE OF PARTNER SCHOOL PRINCIPAL** *(if applicable)***:**

*To the best of my knowledge and belief, all information in this application is true and correct.*

|  |  |  |
| --- | --- | --- |
| Name of Principal at partner school  *(if applicable):* |  | |
|  | |  |
| *Signature of Principal at partner school[[1]](#footnote-2)* | | *Date* |

**SECTION 1: Experience and Demonstrated Ability**

*Responses to Section 1 are to be no more than* ***1 page*** *(8½” x 11”) and submitted using the submission template provided. Any content that exceeds the page limit will be redacted and not considered as part of application review.*

**SECTION 2: Program Delivery and Impact**

*Responses to Section 2 are to be no more than* ***4 pages*** *(8½” x 11”) and submitted using the submission template provided. Any content that exceeds the page limit will be redacted and not considered as part of application review.*

**SECTION 3: Cultural Responsiveness**

*Responses to Section 3 are to be no more than* ***1 page*** *(8½” x 11”) and submitted using the submission template provided. Any content that exceeds the page limit will be redacted and not considered as part of application review.*

**SECTION 4: Labor Harmony**

*Responses to Section 4: Labor Harmony are to be completed using the template provided and submitted with all other sections. Attachments do not count towards the page limit and are to be submitted as a separate file.*

The City values labor harmony, which means agencies work to prevent labor disputes, which may lead to work stoppages or adversely impact the ability of FEPP Levy-funded programs to achieve intended outcomes.

In your response, please indicate if your agency is committed to avoiding labor disputes that disrupt services by checking the appropriate box.

Yes   No

If your organization has standard practices and policies that uphold this principle, such as a labor harmony agreement or a collective barging agreement, **please attach with your submission as a separate file** (Word or PDF). This attachment will not count towards the page limit.

**SECTION 5: Asset-Based Survey**

*Responses to Section 5: An asset-based survey is to be completed using the template provided and submitted with all other sections. Attachments do not count towards the page limit and are to be submitted as a separate file.*

Successful applicants will be required to administer an asset-based feedback survey to participating youth grade at the end of the summer program. DEEL will work with funded organizations to develop a brief survey tailored to their program.

The survey can be administered electronically or on paper. It is recommended that program staff plan to set aside 20 minutes during regular program hours for participants to complete the survey during their final days of programming. Further information will be provided at the technical assistance sessions.

Please indicate if your agency is committed to collaborating with DEEL on survey content and administering an asset-based survey of participating youth by checking the appropriate box.

Yes   No

If your organization currently uses an asset-based survey tool to assess program impacts and you are awarded funds, DEEL will work with you to align efforts and minimize the burden placed on program participants to complete surveys.

**SECTION 6: Health Emergency Contingency Plan**

*Responses to Section 6 are to be completed using the template provided and submitted with all other sections. Attachments do not count towards the page limit and are to be submitted as a separate file.*

DEEL is interested in proactively addressing any possible impacts a health emergency (such as Covid-19) may have on summer programs to the extent possible. Please confirm that your agency is committed to following the Washington State and King County Dept of Health Requirements in K12 Schools, Day Care, Early Learning Youth Development, and Day Camp Programs to minimize any potential impacts to your program/service proposal.

Yes  No

1. *Principal approval is required for organizations partnering closely with a school or planning to use an SPS school building/campus. Applicants can demonstrate principal approval via physical or electronic signature on the cover sheet, or by attaching an email, signed letter of support, or partnership agreement to the application.* [↑](#footnote-ref-2)