## MIS#538 FUNDING OPPORTUNITY APPLICATION PROCESSING/BOARD APPROVAL

#### FORM INSTRUCTIONS & FIELD DESCRIPTIONS

<u>Purpose</u>: MIS#538 is required to be completed and attached to the funding opportunity (**FO**) application and announcement. This form summarizes information about the FO and provides a central document to record authorizations and approvals.

<u>Instructions</u>: The form is in fillable PDF format, meaning you can type in all information using the standard Adobe Acrobat Reader application. Below is a field-by-field description of the items needed. A red box will surround all required items. Note that some fields will be required based on answers to other questions. Once completed, submit the MIS#538, FO application, FO announcement, and other supporting documents (quotes, carts, proposals, approvals, etc.)

<u>Support</u>: Don't hesitate to contact the Grants Office (GO) if you have any questions or need further assistance.

Field Descriptions: The circled numbers correspond to the fields on the attached sample MIS#538.

1	Enter the official name of the FO as listed in the FO announcement.
2	<ul> <li>Check the type of FO.</li> <li>Non-Competitive: This type of FO is for an entitlement</li> <li>Competitive: The funder will judge the application and may or may not award the funds.</li> <li>Amendment: Check this option if this is a change to a previously awarded FO.</li> <li>Other: Check this option if the FO does not fall into one of the three options above, and provide a description. For instance, if a local business offers a donation, this option is checked, and "Donation" is the description.</li> </ul>
3	Enter the amount of the FO.
4	FO greater than \$5,000 requires Board approval. Please check this box if applicable.
5	Select the District strategic mission this FO addresses. Multiple selections are allowed.
6	Provide the name of the department or school utilizing the funds.
7	Provide at least one department or school contact. Listing a secondary contact is recommended.
8	Provide at least one department or school contact responsible for FO reporting or monitoring. Listing a secondary contact <i>is recommended</i> .
9	Provide the purpose of the FO. You can find this information in the invitation or other documents the funder provides. This field has a 250-character or 2-line limit, so be succinct.
10)	Briefly summarize the use of the funds that will meet the FO's purpose. This field has a 900-character or 7-line limit.

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11)	<ul> <li>Federal Funds: These grants administered by a Federal agency with funds provided by the Federal govenrment.</li> <li>State Funds: These are grants administered by a State agency that uses either Federal (ie Title I, Part A) or State funds.</li> <li>Matching Funds: Some FOs require a match in funds; list the amount here, if needed.</li> <li>In-Kind Contributions: Some FOs require an in-kind contribution, such as labor. List the amount needed.</li> <li>Other Funds: These funds do not meet one of the alternatives. Describe in the space provided. For example, donations would be under "other funds," and the description would be "DONATION."</li> <li>For Matching and In-Kind, list the source of those funds in the space provided.</li> </ul>			
12	If the budget lists a new position or a change in position, check the "Yes" option, which will require a review by the Chief of Staff. Note that the department or school contact is responsible for submitting an MIS#545 to Position Control upon receiving an award.			
(13)	Check this box to confirm that the budget includes the computer and technology maintenance costs for the new or changed position, if applicable.			
14)	If the FO is competitive, list the position's funding source once the FO has ended.			
(15)	Check "Yes" if the FO will impact instructional/non-instructional wages, hours, or working conditions. If yes, the Employee Relations Director or designee must review and approve it before submission.			
16	If the budget includes print/digital instructional materials not on the District's "approved list" (OTIS & IASC), a pre-approval must be sought and attached to this form.			
17)	<b>APPROVALS:</b> The department director or school principal must approve it before submitting it for routing. Once submitted, the Grants Office, Finance, and a Deputy Superintendent or Chief of Staff must approve it. Board approval may also be required.			
18	If this submission is an amendment to an FO Opportunity and the total funding amount has changed, check "YES" and answer items 19, 20, and 21. Otherwise, check "NO" and move on to field #21.			
19	Enter the original amount of the funding opportunity.			
20)	Enter the amount of the amendment change. For instance, if the original funding amount is \$100,000 and an additional \$25,000 is being added, then enter \$25,000. The next box will automatically add the numbers to reveal the new total amount of the funding opportunity.			
21)	Regardless of whether the funding opportunity amount changes, please provide details on the changes from the original application reflected in this amendment.			
22	If the application is a renewal of a competitive or non-competitive FO, answer "YES," and provide the budget questions under 1 and 2.			

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23)	For the prior year, provide the total initial budget (Total Budget) and any roll-forward funds received (Roll Forward).	
24)	For the new application this year, provide the total initial budget (Total Budget) and any anticipated roll forward funds (Anticipated Roll Forward).	
25	If any activities from the prior year need to be discontinued with the renewal application, check "Yes" and provide, in the space allotted, information on how those changes will affect activities, projects, staffing, etc., and the reasons for discontinuation.	
26	If any new activities are to be added to the renewal application, check "Yes" and provide, in the space allotted, information on those new activities, projects, staffing, etc., and how they will align with the District's mission and initiatives.	



# PASCO COUNTY SCHOOLS FUNDING OPPORTUNITY APPLICATION PROCESSING/BOARD APPROVAL

CLICK HERE FOR INSTUCTIONS

1	OFFICIAL FUNDING OPPORTU	JNITY TITLE				
2	TYPE OF FUNDING OPPORTUNITY (Check one, if "Other" provide description)  NON-COMPETITIVE OMPETITIVE					
	FUNDING OPPORTUNITY AM	OUNT Board appro	val is required for all funding opport	unities over \$5 000		
	AMOUNT: (3)		portunity is <b>\$5,000 or greate</b>	$\overline{}$		
_	Select the Strategic Mission t	his funding opportunity addre	esses (multiple sections are a	llowed):		
(5)	Academic Achievement Educator Development	Parent Engagement School Safety & Well-Bei	Community Engagement	Career Connec	ted Learning	
6	DEPARTMENT OR SCHOOL FILE	LING THE FUNDING OPPORTU	NITY APPLICATION			
	FUNDING OPPORTUNITY CON	NTACT(S)				
$\overline{7}$	CONTACT #1:		EMAIL:			
	CONTACT #2:		EMAIL:			
	REPORTING & MONITORING	CONTACT(S)				
8	CONTACT #1:		EMAIL:			
	CONTACT #2:		EMAIL:			
_	PURPOSE OF THE FUNDING C	OPPORTUNITY (250 character or 2-l	line limit)			
9						
	DESCRIPTION OF THE USE OF	FUNDS (900 character or 7-line limit	t)			
_						
(10)						
	BUDGET INFORMATION (Ente.	r 0 if no funds are allocated or required	d)			
(11)	BUDGET INFORMATION (Ente. FEDERAL FUNDS STATE FUN		i) IN KIND CONTRIBUTIONS*	OTHER FUNDS*	PROJECT TOTAL	
(11)	FEDERAL FUNDS STATE FUN	DS MATCHING FUNDS*	IN KIND CONTRIBUTIONS*	OTHER FUNDS*	PROJECT TOTAL \$ 0.00	
(11)	FEDERAL FUNDS STATE FUN		IN KIND CONTRIBUTIONS*	OTHER FUNDS*		
(11)	FEDERAL FUNDS STATE FUN	MATCHING FUNDS*  ng". "In kind contributions". or "other fo	IN KIND CONTRIBUTIONS*	OTHER FUNDS*		
<ol> <li>11)</li> <li>12)</li> </ol>	*Provide a description of any "matching POSITION INFO & OTHER ASS	MATCHING FUNDS*  ng". "In kind contributions". or "other fo	IN KIND CONTRIBUTIONS*			
	*Provide a description of any "matching position in Four	MATCHING FUNDS*  ng". "In kind contributions", or "other functions"  GURANCES  uire a NEW or a Change in Posi  5, then the signature of the Chief of Staff r	IN KIND CONTRIBUTIONS*  unds"  ition (If No, move to question "(2) required here:		\$ 0.00	
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	*Provide a description of any "matchin"  *Provide a description of any "matchin"  *Provide a description of any "matchin"  *POSITION INFO & OTHER ASS  1 Does this opportunity require (Once awarded, it is the response)  13 Check here to confirm	MATCHING FUNDS*  BURANCES  uire a NEW or a Change in Posis, then the signature of the Chief of Staff in	ition (If No, move to question " (2) required here: submit MIS#545 to Position Control) logy maintenance is included for any maintenance.	)")	YES NO	
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(12)	*Provide a description of any "matching provide a description of any "matching provided a description of any "matching provided a description of any "matching provided provid	MATCHING FUNDS*  Ing". "In kind contributions", or "other functions", or "other function	ition (If No, move to question "(2) required here: submit MIS#545 to Position Control) logy maintenance is included for any mined past the opportunity period?	)") new positions in this op	YES NO NO Date:	
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<ul><li>(12)</li><li>(15)</li><li>(16)</li><li>(16)</li></ul>	*Provide a description of any "matching and the provide and the p	MATCHING FUNDS*  Ing". "In kind contributions", or "other functions", or "other function	IN KIND CONTRIBUTIONS*  unds"  ition (If No, move to question "(2) required here: submit MIS#545 to Position Control) logy maintenance is included for any regimed past the opportunity period?  onal wages, hours, or working equired here: they are on the IASC/OTIS approva	)") new positions in this op g conditions?	Poportunity budget.  O YES O NO Date:  O YES O NO Date:  N/A O YES O NO	
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	FUNDING OPPORTUNITY AMENDMENT CHANGES	
(18)	(1) Is there a change in the funding opportunity amount? If so, please indicate the amounts in the boxes below	O YES O NO
	ORIGINAL AMOUNT: 19 AMENDMENT CHANGE: 20 NEW FO AMOUNT:	
	2 Provide details on the changes this amendment makes to the original application.	
$\Omega$		
(22)	FUNDING OPPORTUNITY RENEWAL	Over One
	Is this application a renewal of a non-competitive or competitive funding opportunity?	OYES ONO
	If Yes, please answer the following questions.	
	1 For last year, please provide the total budget amount and the roll forward amount received (if applicable).	
	Total Budget: \$	
	(22)	
	Roll Forward: \$	
	2 For this year, please provide the total budget amount and the anticipated roll forward amount received (if appl	icable).
	Total Budget: \$	
	Anticipated Roll Forward: \$	
(25)	3 Are any activities funded with last year's budget being discontinued?	OYES ONO
	If YES, Please provide information on the activities, projects, staffing, etc. that are affected?	
26)	4 Are there any new activities that are being added?	OYES ONO
		•
	If YES, provide details on the activities, projects, staffing, etc. to be added and how it aligns with the district mission and inition	atives?