**The Arkansas ARP ESSER III Afterschool and Summer Learning**

**2023-24 Competitive Grant Program**

**Title Page**

**School/Group/Organization Applying:**

**School Principal/Executive Director/Project Director:**

**Designated Grant Contact Person: Title:**

**Address:**

**City/State/Zip Code:**

**Phone Number:**

**Email Address:**

**Project Site(s)** **Location** (If multiple sites, please provide the physical address of each site):

**Project Name** (If different from the name of the entity applying): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Brief Project Description:** Please complete the section below to provide a brief summary of the project for which funds are requested including the targeted area of the state or school district, identify the number of students to be served, age groups, and percentage of Free and Reduced Lunch Rate of the targeted school district.

**Amount of funding requested**: (**The maximum award is $150,000 dollars**)

**Program type**:

\_\_\_ Afterschool & Summer \_\_\_ Afterschool Only \_\_\_ Summer Only

**Age range(s) of students served.** (*ARP ESSER III funding can only be used to serve students grades K-12*) **Check all that apply**:

\_\_\_Elementary School \_\_\_Middle School \_\_\_High School

**The Name of the School District(s) your project is located in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The % of Free and Reduced Lunch Rate students in your school district: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The estimated number of students that will be served**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The number of sites that will be served**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The estimated cost per student**: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The proposed project’s timeline** (*The ARP ESSERIII 2023-2024 performance period is September 1, 2023 – August 31, 2024.*)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Are you registered at Sam.gov?** Yes/No **Unique Entity Identifier** (**UEI #):** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Commercial and Government Entity (CAGE) Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Applications without signatures will not be processed.**

**Name of the Authorized Signer (Please print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Authorized Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**