



Community PLUS Request Form

Request Forms Accepted: February 26, 2020 - May 22, 2020

Overview

CASE for Kids places direct service providers in out-of-school time programs to address unique needs in targeted communities within Harris County. Community PLUS offsets costs that could be spent on other services in an effort to help build organizational capacity. Programs must be actively engaged with a community initiative or a collaboration that is striving to serve youth within Harris County boundaries. Programs must also serve high need student populations 4-12 years of age, or up to 19 years of age with a documented disability.

Community PLUS provides a wide range of hands on, fun activities that integrate literacy and numeracy development and social emotional learning. These activities will enhance or supplement existing out-of-school time programming at <u>no cost</u> to the program. CASE for Kids will directly contract content experts through our service provider public bid list, that is sent out for bid annually. Students will have the opportunity to explore the world of arts, science, physical fitness and more.

Program Eligibility

To be eligible for participation in Community PLUS, programs must:

- Be a comprehensive out-of-school time program operating within Harris County
- Be a comprehensive out-of-school time program operating at least 3 hours per day/4 days a week
- Serve youth 4-12 years of age, or up to 19 years of age with a documented disability
- Complete and return the attached request form to <u>jchavez@hcde-texas.org</u>

Collaboration / Responsibilities

Programs must efficiently collaborate with CASE for Kids and the assigned provider to carry out the activities. CASE for Kids will provide the following:

- Contracted content expert (provider)
- Technical support, by email and/or phone and site visit to observe services offered by the vendor as needed.

Participating programs are responsible for the following:

- Provide a copy of the site's operation schedule by completing the **request form**
- Provide appropriate space for activities
- Coordinate schedule with the matched provider
- Provide students to attend the provider's classes
- Inform the provider of program policies and site safety protocols
- Designate program staff to be present and complete a Provider Observation Tool during all provider classes

Submission Requirements & Procedures

To be considered for participation in Community PLUS, sites must complete the attached **request form** and e-mail it to Jacqueline Chavez, <u>jchavez@hcde-texas.org</u>. Request forms will be accepted on a rolling basis between February 26, 2020 – May 22, 2020. Responses to questions on the **request form** should be typed or clearly printed in blue or black ink. The form <u>must</u> be signed by a program representative and/or a campus administrator to be considered valid.

Site Selection

Request forms will be reviewed on a first-come, first-serve basis. Eligible Community PLUS sites will be selected based on programs working with an identified community initiative, program need and location, availability of providers and funding. Sites will be notified of selection and next steps via email within 15 days of form submission. If selected, organization will be provided with an interest form to help match the site with the most appropriate content area provider.

Contact Information

Questions? Contact Jacqueline Chavez via e-mail at jchavez@hcde-texas.org or by telephone at (713) 696-2132.





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GENERAL INFORMATION:

Program Name				
Contact Person				
Contact Information	Email:			Phone Number:
Site Address				Zip Code:
Total # of Students in Program				
Student Grade Level(s)	□ K-1	□ 2-3	□ 4-6	□ 7-12 with a documented disability

	Priority Areas
This program is associated with the following (check all that	□ Out-2-Learn □ CASE for Kids City Connections □ Super Neighborhoods □ COH Complete Communities □ TEA Priority and Focus Schools
apply):	Other:

SITE OPERATION SCHEDULE:

Spring 2020	Summer 2020		
□ M □ T □ W □ Th □ F □ Sa □ Sun	\Box M \Box T \Box W \Box Th \Box F \Box Sa \Box Sun		
Start Date: End Date:	Start Date: End Date:		
Daily Start Time: Daily End Time:	Daily Start Time: Daily End Time:		

SHORT ANSWER:

Please describe the specific need your program seeks to address. Optional: include the preferred provider name to address this need. (LIMIT 75-100 words)

PROGRAM CHECKLIST:

(Program Representative: please initial in each blank to indicate you will comply with each statement.)

- Yes, our program will participate in Community PLUS if selected by CASE for Kids.
- I understand the information on this **form** and agree to comply with the terms.
- I confirm that my program has anticipated programming for school age students during this time frame.
- I agree that program staff will be present and actively engaged while provider is offering classes.

CERTIFICATION:

I certify that my organization meets all stated eligibility requirements and that all information contained on this **request form** is true and accurate. I further certify that, if funded, my site's program will be carried out in accordance with the program plan described in this request form and will notify CASE for Kids of any changes.