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## Request for Hub Club Programing at JSEC

**Fall 2018**

# Deadline: Friday, August 24

# Overview

The Providence After School Alliance (PASA) will be working with students, faculty, staff, and community partners to build a dynamic 21st Century Community Learning Center (21CCLC), with a grant from the Rhode Island Department of education. This spring we are instituting a system of Hub Clubs (After School Programs) that will run for 10 weeks. This initiative will be a hybrid consisting of PPSD teacher-run programs and programs run by community organizations. These programs make a connection to PASA’s graduate profile and continue to allow students to develop critical 21st Century Skills.

**Program Overview**

* The Hub at JSEC will offer 9-12 Hub Club programs running for a total of 10 weeks starting on **Tuesday, October 9, 2018-Thursday, December 13, 2018**. We are asking teachers and community partners to submit proposals for programs they would potentially like to offer as part of the Hub’s aligned multi-programs approach at JSEC.
* Programs will operate in the school as well as at off-site locations. However, to simplify logistics for students, programs that can physically operate at JSEC are expected to do so.
* Transportation will be provided to off-site locations only when the facilities or equipment offer unique opportunities for the participants; transportation needs should be discussed with the JSEC Hub Coordinator prior to submitting you proposal.

**Provider Expectations**

* **All applications should be submitted electronically to cparks@mypasa.org**
* All accepted applications will be notified by **Friday, September 7, 2018**.
* Providers are required to participate in coordinated recruitment events targeted at youth and families. All program providers will be notified the exact date/time and are expected to participate.
* Providers are required to participate in a provider orientation in the month of September. The date and time is **Wednesday, September 26 from 3:00-4:30**.
* Providers will be required to reach out to youth and families via phone before their program begins.
* Any program with average daily attendance below 4 may be discontinued at any time.
* Program providers must arrive **15 minutes before the start of their program**.
* Program instructors need to have a national background check, resume, and insurance on file with PASA. However, **do not submit these forms with your application**; instructions will be provided to funded programs on when to submit these documents.

**\*\*Additional expectations will be discussed during orientation with accepted programs.**

**Orientation information will be provided at a later time\*\***

**Budget Details:**

**As you prepare the attached budget form for your program, please consider the items listed below. Applicants should be judicious when determining budget amounts. Proposals will be reviewed as part of a competitive process, and the costs submitted for a program will be measured against other applications. Reviewers will consider the quality of the experience for youth at the same time they are looking at the cost per youth for the proposed programs.**

1. The hourly rate for PPSD teachers is a maximum of $25 per hour. Community organizations and independent contractors request an hourly rate that is subject to negotiation. If a second instructor is used in the program, providers may want to consider paying them a lower rate, especially if the second instructor is less experienced. For any questions about the hourly rate, please contact JSEC Hub Coordinator Ciara Parks ([cparks@mypasa.org](mailto:cparks@mypasa.org) / (401-345-7339).
2. The programs will run for 10 weeks.
3. Sodexo provides daily snacks for all youth participants, so food costs should not be included in your budget (unless you are applying to run a food preparation program).
4. Any equipment that applicants are asking to be funded should be identified as reusable or not. Providers should identify if they will need assistance with storage of these materials. If materials are reusable, these items will be the property of the Hub.
5. For those requesting funding for field trips or other off-site events related to your program, please detail these costs in the “Other Costs” section of the budget form and provide a detailed description in the budget narrative. Since the logistics and travel costs for these trips can be prohibitive, funding for field trips will only be funded if the applicant has discussed the field trip with Hub staff prior to submitting the proposal.
6. **Community Organizations** funded for Hub Club programs will receive the first half of the payment halfway through the program and the second half of the payment upon program completion and student retention. **Supply costs are to be included in the total budget and explained in the budget narrative. All supplies will be purchased by the community organization.**

***Spring 2018 Session Cover Page***

**Organization/Teacher**:

**Primary Contact Person:**

**Program Instructor:**  **Email:**

**Address:**

**Phone:** **Cell Phone:**

**Please skip the following question if you are a teacher or independent contractor. Insurance options are available under PASA for those wishing to apply independently:**

**Organizational 501(c)3 tax exempt # (or EIN#)**

(Non-profit and for-profit providers must provide proof of insurance and be in good standing with the IRS. Providers

must supply PASA with proof of insurance before conducting programming. The Community Partner’s Insurance shall include, at

minimum, an umbrella liability policy of $1,000,000 for property damage and personal injury where PASA and Providence Public

School Department (PPSD) are named as additionally insured.

**Title of proposed program**:

**This program is primarily:**  Sports  Skills-Building  Arts  STEM Other

**Program Capacity:**

Note: The Hub program adult-to-youth ratio is a maximum of 13 youth for every 1 adult. PASA requires that all grantees adhere to this ratio at all times or the program cannot be funded.

**Total number of students who can attend your sample program, based upon the number of instructors each day:**

**Program Length** – **10 weeks**

**Days of the week**)**:** Check all possible days you can provide your sample program:

 Mon/Wed  Tue/Thu  Either

**Program location and schedule:**

Please indicate whether your Hub Club program will take place at JSEC or at a community-based site. Please keep in mind that as a way to minimize the cost and challenges of transporting youth to off-site locations, programs that can physically operate in schools are expected to do so.

 This program can take place in the school. Please select your time preference:

 3:00-4:30 p.m.  3:00-5:00 p.m.

 This program is designed to take place at a community-based site (3:30-5:00 p.m.)

 I have already secured a specific program location:

**Facilities:**

Please indicate what type of room or facility you need to run your program so that PASA can help secure space for your program; please check all that are suitable.

 Auditorium/Stage  Art Room  Classroom  Library/Computer lab

 Kitchen Field/Outdoors  Other:

**Program Plan**

**a.** Please provide a **youth friendly** description of your program. This description may be used in recruitment materials so be sure to highlight aspects of your program that will appeal to high school aged youth and engage them in the idea of the program (3-4 sentences).

*Tip: Use vivid snapshots of your program that will help youth imagine themselves in your program!*

**b.** Please attach a draft 10-week outline of the proposed program that includes what topics and activities will be covered in the program. Please also include any final products or presentations/performances that will be included in the program. This is a critical component to the review process. Please use this section to bring your program to life for reviewers.

**c.** In 3-4 sentences please describe the learning outcomes youth can expect to gain from your program? ***Think about tangible skills (i.e. sewing, first aid, knife safety) as well as PASA’s Graduate Profile Skills (i.e. perseverance, engagement in learning, communication, critical thinking, and teamwork) in your response.***

**Motivation & Experience**

Why are you interested in providing this program? What experience have you had in leading this or related programming in the past? (3-4 sentences)

## SECTION B – PROGRAM BUDGET

**For Teachers & Community Providers**

The hourly rate for PPSD teachers is a maximum of $25 per hour. Community organizations request an hourly rate and are subject to negotiation. If a second instructor is used in the program, providers may want to consider paying them a lower rate, especially if the second instructor is less experienced. PLEASE use the chart below to detail your staffing plan. ***Note****: successful program applicant’s total staff costs will be adjusted to account for district, state and federal days off from school.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Staff** | **Payment** | | | | | | | **Sub-Total** |
| List each staff by role | rate | x | hours per day | x | # of days per week | x | # of weeks | List total payment for each staff |
|  |  | x |  | x |  | x | 10 | = |
|  |  | x |  | x |  | x | 10 | = |
|  |  | x |  | x |  | x | 10 | = |
|  | **TOTAL STAFF COSTS:** | | | | | | |  |

**For teachers and community providers**

|  |  |  |
| --- | --- | --- |
| **Materials** (if applicable)  Describe type of supplies | **Quantity & Cost**  List the quantity and cost for each item | **Sub-Total**  List total cost for each supply line |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Total Staff + Supplies Cost =\_\_\_\_\_\_\_\_\_\_**

**SECTION C – BUDGET NARRATIVE**

1. **Budget narrative**

**Applicants are required to include a budget narrative describing key items from the completed budget form by answering the following question if applicable. If you are requesting funding for materials, please describe how these will be used and, if reusable, how they will be stored, reused, etc.?**

**SECTION D – DROP-IN PROGRAMMING**

In efforts to better address student’s desires for more flexible programming, the Hub is considering an alternative to our traditional ten week session model by providing students with options for programming that can meet a variety of scheduling needs. At this time, The Hub is considering offering drop-in style programs. These programs might continue longer than 10 weeks, possibly more times a week, with specifics to be determined. Program content could not rely on prior program days, as youth attending programs in this model would be able to drop in as often or little as they are able.

All successful applicants chosen for the drop-in model will meet with the Hub Coordinator directly to discuss details further.

If you are interested in being considered for a drop- in program, please answer the following questions. If this is not something of interest to you at this time, you may skip this section.

**a.** **Please explain your program idea and why it is conducive to a drop-in model as opposed to a session model. How would it enhance the student experience?**

**b.** **Please go into detail about the opportunities available on a daily basis at your program and the space you envision.**

**c.** **Please provide specific details of activities available for students within your drop-in space.**

**Application Review and Approval Process**

* Funding requests will be reviewed by PASA staff members.
* Community Organizations must supply PASA with proof of insurance before prior to the start of programming.

**Proposal Packet Checklist**

* Cover page
* If applicable, documentation of 501c3 status or EIN#
* Section A - Program Information & Staffing
* Section B - Program Plan & Program Outline
* Section C - Budget Form

**Submit ALL application materials by Friday, August 24, 2018** and direct any questions to:

**Ciara Parks**, Hub Coordinator

[**cparks@mypasa.org**](mailto:cparks@mypasa.org)

**The Hub Office @ JSEC**

Providence After School Alliance

81 Carpenter Street

Providence, RI 02903

(401) 345-7339 mobile / (401) 228-3915 fax

**For PASA use only:**

**Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Application #: \_\_\_\_\_\_\_**