FP 202 - Device Maintenance and Replacement Grant

Introduction

The questions below are provided for you to work on this grant outside of EGMS. Please use this to work as a team in a shared document to formulate your thoughts and prepare your grant for upload. Please cut and paste your responses directly into the EGMS grant application

Grant Overview

This grant follows RCW 28A. 650. 065 as funded by ESSB 5187.SL (4) Eliminating Inequitable Student Outcomes, (p) technology grant program.

This grant is not designed to address the replacement cycle of devices, but instead for unexpected needs like sudden influx of new students, and/or lost, stolen or damaged items. Only applicants without an in-house industry certified repair facility are eligible for this grant.

Grant priority is for high FRP districts and schools, especially small rural remote districts.

The grant has four main goals to help districts and schools without an in-house industry certified repair facility.

- Replace broken devices when repair is not possible, or cost of repair is not cost-effective (laptops/chrome books/tablets)
- Send devices out for repair that are currently not fully functional and where repair is cost-effective (laptops/chrome books/tablets)
- Achieve 1:1 for an unexpected influx of students
- Replace lost or damaged power cords, headsets or mice

Grant Application Questions

1. Are you using this grant as a replacement grant for your device fleet? (YES/NO)

2. What do you do with your broken devices? (Pick One)
   o We send most out for repair
   o We try to fix most in house
   o We have in-house industry certified repair facility
   o We have help from our ESD

3. What goal(s) below are you attempting to address? (Check all the apply)
   o Replace lost, stolen, or damaged laptops/Chromebooks/tablets
   o Achieve 1:1 for an unexpected influx of students
   o Replace lost or damaged power cords, headsets or mice.

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Numbers Needed
4. Please indicate how many of each category you need to replace, the cost and the priority.

Category	#of Items	Cost	Priority	Shipping
Device needs repair to be fully functional				
Device is broken beyond repair				
Student's previous device was stolen or lost				
Unexpected Need (New Students/Transfers)				
Power Cords				
Headsets				
Mice				

5. If New/Transfer Student Unexpected was checked, describe the circumstances behind the sudden influx of new students. Write n/a if not applicable.

6. Please check how your district defines a 1:1 device program.   (Pick 1)
    - o   Students have access to shared devices (cart, central location)
    - o   Students have assigned devices dedicated to their classrooms
    - o   Students have unassigned devices dedicated to their classroom
    - o   Students assigned devices that stay primarily at school
    - o   Students have assigned devices that regularly travel between school and home
    - o   Students have assigned devices that stay primarily at home

7. What is your current device to student ratio? _____

8. Briefly describe your technology plan. (i.e., How did you assess your needs for this grant, and how will you implement the deployment?)

Device Use
9. If you are asking for devices; how many of these devices are aimed for general deployment, online students, or students with adaptive or assistive device needs?

Category	Number of Items
General Deployment	
Predominately Online students	
Students with adaptive or assistive needs	

Yearly inventory

10. On average how many devices are lost, broken or stolen in your district every year?

Category	Actual #	% of Fleet
Lost		
Broken		
Stolen		

11. What are your policies around lost, broken or stolen devices?

12. Are students penalized for lost, broken or stolen devices? If so, how?

13. What pre-existing programs or funding sources have you utilized in the past to provide learning devices to students? (Pick all that apply)

- o   Federal (non-Title funds)
- o   Federal Title Funds
- o   LAP Funds
- o   Other State Funds
- o   Local funding (EP&O/technology/capitol levee or bond)
- o   Donations
- o   General Fund
- o   Other - Write In _____

14. How many students do you anticipate serving with this grant?

15. What is your Free Reduced-Price Percent (FRP)? (CEP schools write 100%)

16. a) Do you have adaptive or specialized technology needs around 1:1 devices that may not be covered in this grant?
     b) What are the needs? (ie. students with disabilities/English Language Learners)

Contacts
Please list all the contacts below into EGMS (Lead contact might be someone without EGMS access but is the lead partner on the grant)

Role	Title	First, Last Name	Email	Phone
Lead Partner				
Reporting Fiscal Agent				
Technology Director				
Ed Tech Coordinator				
Lead Partner				
Reporting Fiscal Agent				

19. **Budget Detail**

Item	Detailed Description + How amount was calculated	Amount
Supplies (consumables)		
Capital Outlay (e.g., computer hardware)		
*Indirect Costs		
	Grand Total	