



**TECHNICAL CENTERS THAT WORK (TCTW) APPLICATION**

**INSTRUCTION**

Completed application and proposal must be received no later than May 18 2020 at 1:00 p.m.

Email the completed application and proposal by the due date to: [webreplyvae@dese.mo.gov](mailto:webreplyvae@dese.mo.gov) Application, proposal and budget must be submitted in one PDF or Word document. Do NOT submit application, proposal and/ or budget as a Google Doc or in any other format.

Proposal must address the following questions. The narrative portion of the application is to NOT EXCEED ten pages, single-sided, and double-spaced. Font size should be comparable to Times New Roman-12 point.

1. Why does your school wish to become a TCTW site? Include any current factors which can be improved by the TCTW initiative. Include data which would indicate areas where improvement could be expected.
2. Describe your current assessment of existing practices as they pertain to the TCTW Key Practices. Include challenges and barriers to fully implementing the TCTW Key Practices.
3. Identify current reform efforts in which your school/school partners are currently engaged in. How do these efforts align to the TCTW initiative?
4. Describe your plan to utilize TCTW or other professional development offerings. Who will be included in professional development opportunities? What outcome do you expect to achieve as a result of these opportunities?
5. How will participation in this initiative better enable your students to transition into postsecondary education without remediation or into the workforce with skills necessary for advancement?
6. How will this initiative assist you in providing challenging career education programs and encourage improved overall academic achievement for your students?
7. Describe partner commitment, support, and leadership toward this initiative. Partners would include district and school staff and leaders, boards as well as business partners, community partners, parents, students, or others.
8. Budget: Include Application for Authorization of Career Education Expenditures form (FV-4) and separate explanation for budget items.

QUESTIONS: Contact the Career Education Curriculum Coordinator at: [webreplyvae@dese.mo.gov](mailto:webreplyvae@dese.mo.gov) or 573- 526-4900.

**SCHOOL INFORMATION**

LOCAL EDUCATION AGENCY (LEA) NAME		COUNTY-DISTRICT CODE
PARTICIPATING SCHOOL NAME		SCHOOL CODE
GRANT CONTACT PERSON		TITLE
SCHOOL ADDRESS		
SCHOOL PHONE NUMBER (INCLUDING EXTENSION)		OTHER PHONE NUMBER
EMAIL ADDRESS		
TYPE OF GRANT <input type="checkbox"/> TCTW Stand-Alone <input type="checkbox"/> TCTW and Making Middle Grades Work (MMGW) Partnership <input type="checkbox"/> TCTW and High Schools That Work (HSTW) Partnership <input type="checkbox"/> TCTW, Making Middle Grades Work (MMGW), and High Schools That Work (HSTW) Partnership		
PARTNER SCHOOL NAMES		
The district authorized representative assures full compliance with the TCTW Grant provisions as described in the TCTW FY2021 application packet.		
SIGNATURE OF SUPERINTENDENT OR AUTHORIZED REPRESENTATIVE		DATE

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