

# New Braunfels ISD Title II Program Expenditure Request

Date	Campus	Total Cost of Request
<b>Justification</b>		
Briefly explain how this request is compliant in meeting the general program requirements for Title II, Part A, specifically the targeted best practice area, <b>(check at least one box)</b> how the professional growth of staff will be impacted, as well as the target population.		
<input type="checkbox"/> Assessments and Data Analysis	<input type="checkbox"/> Evaluation and Support Systems	
<input type="checkbox"/> Career Readiness Education	<input type="checkbox"/> Evidence-Based Professional Development	
<input type="checkbox"/> Child Sexual Abuse Prevention	<input type="checkbox"/> Identification and Support of Gifted Students	
<input type="checkbox"/> Early Childhood Instruction	<input type="checkbox"/> School Library Programs	
<input type="checkbox"/> Effectively Teaching Children with Disabilities	<input type="checkbox"/> Supporting Students Affected by Trauma and/or Mental Illness	
<input type="checkbox"/> Effectively Teaching English Learners	<input type="checkbox"/> STEM-focused Professional Development	
Notations:		
Note where this is supported in your <b>Campus Improvement Plan</b> (i.e., Goal 3: Strategy 6) or <b>District Improvement Plan</b> (if at the district level).		
Specify how this is evidence-based in improving instruction and helping meet the challenging state standards. <b>You must include a link or documentation of research.</b>		
<b>Request</b>		
List the material(s), equipment, or service(s) requested:		
Is this request supplemental and not supplanting current programs or regular budgetary items* <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
1. What is our current district-provided curriculum material resource to address this learning need?		
2. How does this material supplement the learning for students that is not already addressed in the district-purchased curriculum materials?		

<b>Professional Development:</b> <i>(Complete sections A-C only if requesting funds for professional development)</i>
<b>Name of Training:</b>
<b>Date of Training:</b>
<b>A. The training meets the following criteria</b>
<input type="checkbox"/> Is aligned with TEKS <input type="checkbox"/> Addresses effective strategies and techniques for meeting diverse groups of students
<input type="checkbox"/> Is collaborative, job-embedded, data driven, and is of sufficient intensity and duration to have a positive and lasting impression on teacher performance in the classroom: <b>NOT a 1-day, stand-alone, or short-term workshop.</b>
<b>B. Plan for Dissemination:</b>
<input type="checkbox"/> Study Group <input type="checkbox"/> Team Meetings <input type="checkbox"/> Faculty Meetings <input type="checkbox"/> Formal Staff Development <input type="checkbox"/> Other:

\*Some exceptions exist for ESSER-related purchases

