

Letter of Intent to Apply

REVISED 01/08/2018

June 4, 2018

Honorable Tano Tijerina Webb County Judge Webb County Courthouse 1000 Houston Street (3rd Floor) Laredo, Texas 78040

Re: Letter of Intent to apply for Head Start and Early Head Start Supplemental Funds (COLA)

Dear Judge Tijerina:

In accordance with the Webb County Single Point of Contact (SPOC) Policy and Procedures – *revised 3/29/17*, please accept this "*Letter of Intent to Apply*" for grant funds under the Department of Health and Human Services. The Head Start Policy Council and the Webb County Head Start/Early Head Start Program request authorization to apply for a grant of \$274,511 (Federal) and \$68,628 (Non Federal In-Kind) for a total amount of \$343,139 from September 1, 2018 through August 31, 2019 for a cost-of-living adjustment (COLA) of 3% to all employees. Your favorable review of the following information required under the SPOC policy and authorization to develop and submit the grant proposal shall be appreciated.

General Information:

A. Project Title: Head Start (HS) and Early Head Start (EHS)

Project Description: The Consolidated Appropriations Act, 2018, contains an increase of

approximately \$610 million for programs under the Head Start Act for Fiscal Year 2018. A portion of the increase provides a cost-of-living adjustment to assist grantees in increasing staff salaries and fringe benefits and offsetting higher

operating costs.

C. Contact Person: Aliza Oliveros

D. Department/Office Telephone number: (956) 795-1515

E. All departments that request grant application authorization from the County Commissioner's Court are required to participate in the County Biometric Time Clock Plus system in order to ensure compliance with existing County policy. Please acknowledge compliance with the signature of the designated Contact Person:

Aliza Oliveros/Signature	

	vehicles, except for those involved in undercover work. Please acknowledge the intent to comply with the signature of the designated Contact Person:
\overline{Al}	iza Oliveros/Signature
G	. All future grant-funded programs involving current County employees will include only Full Time Equivalency (FTE) percentages in a project's budget and will also apply to all future renewal projects; Please acknowledge this criteria with the signature of the designated Contact Person:
\overline{Al}	iza Oliveros/Signature
Н	A complete hard copy of the grant application is required to be submitted to the Economic Development Department inclusive with the "Letter of Intent to Apply" at least two (2) weeks before the grant application is presented to the County Commissioners Court requesting authorization to submit the grant application to the State or Federal funding agency. The complete hard copy of the grant application shall include at a minimum - Project Narratives, Performance Statement, Budget, Personnel Budget breakdown and Budget Narratives. This policy will be effective February 27, 2017; If not provided at submission of the Letter of Intent, then it must be submitted with ample time for review and approval by the Grant Application Review Committee (GARC)? Extenuating circumstances for not adhering to this procedure must be provided in writing for review and approval. Please acknowledge this requirement with the signature of the designated Contact Person:
	Aliza Oliveros/Signature
I.	Any and all budget amendments, budget modifications and/or line item transfer requests that may arise from grant-funded activity shall be submitted through the Economic Development Department - Single Point of Contact (whether Competitive or Formula grants, County (Federal and State allocations) that use the Webb County General Fund first then receives reimbursement at a later time). The budget request will be forwarded for review by the Grant Application Review Committee (GARC) for possible placement on the Webb County Commissioner's Court Agenda. Please acknowledge this requirement with the signature of the designated Contact Person:
	Aliza Oliveros/Signature
J.	All departments that request a refunding or continuation grant application authorization from the County Commissioner's Court are required to provide documentation from the Funding Agency confirming/verifying previous or on-going grant compliance. The documentation shall be submitted to the Economic Development Department - Single Point of Contact at least two (2) weeks before the grant application is presented to the County Commissioners Court. Please acknowledge this requirement with the signature of the designated Contact Person:
	Aliza Oliveros/Signature
K	. A representative from the Department requesting authorization to apply for a grant must be present at the Commissioner's Court meeting to respond to any questions from Commissioner's Court regarding the

F. For all grant-funded projects involving current county employees that propose grant funding for overtime will be required to use the County Biometric Time Clock Plus system and have GPS monitors in their

proposed grant application.	Please acknowledge this requirement	with the signature of the d	lesignated
Contact Person:			

Aliza Oliveros/Signature	

L. Project Time Frames: Start Date: September 1, 2018

Ending Date: August 31, 2019

Project Duration: <u>12 months</u>

L. Project Area: Webb County (Laredo, Rio Bravo, and El Cenizo)

Project Analysis:

1) What County needs, services or problems will be addressed by this project? Early childhood education, health, mental health, disability, nutrition, and social service needs. Specifically:

- **Early learning**: Children's readiness for school and beyond is fostered through individualized learning experiences. Through relationships with adults, play, and planned and spontaneous instruction, children grow in many aspects of development. Children progress in social skills and emotional well-being, along with language and literacy learning, and concept development
- **Health**: Each child's perceptual, motor, and physical development is supported to permit them to fully explore and function in their environment. All children receive health and development screenings, nutritious meals, oral health and mental health support. Programs connect families with medical, dental, and mental health services to ensure that children are receiving the services they need
- Family well-being: Parents and families are supported in achieving their own goals, such as housing stability, continued education, and financial security. Programs support and strengthen parent-child relationships and engage families around children's learning and development.
- 2) What is the grant matching amount of local funds or in-kind that will be proposed? All in-kind will come from parents and community providers. Projections are as follows:

Head Start Non-Federal Share PROJECTIONS

\$ 62,736

<u>Source</u>	Service	<u>Rate</u>	Projected Amount
Parent	Various classroom activities and Curriculum /	19.52 per hour @	\$ 62,736
Volunteers	Educational Material @19.52 (AA Teacher	3,213.93 hours	
	Assistant Salary with benefits).		

Type/Source	Rate Per	Number of	Projected
	Hour	Hours	In-Kind
Parent Volunteers – to assist with various	\$18.16	\$18.16 per hour @	\$ 5,892
classroom activities, curriculum related	(EHS AA	324.45 hours	
activities, preparation of educational material,	Teacher		
and all activities that related to the	Salary with		
accomplishment of compliance with Head Start	benefits)		
Program Performance Standards.			

- 3) Will this proposed project add cost, services or any financial responsibility to the County's General Fund after the project ends? No.
- 4) Will this project add employees to the county payroll if and when the grant is terminated? No.
- 5) Does this project propose any monetary grant-funded stipends, incentive pay, supplement pay or any other pay that exceeds County General Fund salary? No.
- 6) What are the operating and maintenance costs of the grant funded project activities that will be funded by the county? None.
- 7) How many citizens will be served and in what way? 1,218 Head Start children and their families and 72 Early Head Start children and their families.
- 8) Please provide the name of the department representative responsible for providing the Economic Development staff with the copy of the submitted grant application. <u>Aliza Oliveros</u>

Financial Analysis

A.	Type of Request:	Grant ($\sqrt{}$) Loan () Combination ()
		Amount of Request:	\$ <u>274,511</u>
		Amount of Cash Match/In-Kind	\$ <u>68,628</u>
		Total Project Costs:	\$ <u>343,139</u>
		New () Continuation ($\sqrt{}$)	
		Funding Agency: Department of I	Health and Human Services

- B. Is there any assurance that the grant will be continued/refunded by the funding agency? Yes. This Refunding application is for the fifth year of a five year funding cycle.
- C. What wording or commitments will be included in the grant application for 'continuity of activities', 'project sustainability plan' or 'funding of activities' after the grant has ended? The Head Start and Early Head Start grant is funded on a five year cycle with a "Full Application" required for year one of each five year cycle.

For Economic Development Department Office Use Only:		
IV. APPLICATION REVIEW COMMENTS		
A. STAFF COMMENTS:		
Staff Signature:	Date:	