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|  |  **Mississippi Department of Education** Office of Federal Programs P.O. Box 771 **|** Jackson, MS 39205-0771 Tel (601) 359-3499 **|** Fax (601) 359-2587  |

INSTRUCTIONS for PLAN TEMPLATE:

**ESSERF FINAL EQUITABLE SERVICES PLAN**

Federal Programs Directors:

You may use this template to create your ESSERF FINAL EQUITABLE SERVICES PLAN for an individual private school.

Using the ESSERF EQUITABLE SERVICES CONSULTATION CHECKLIST to guide the discussion during consultation with the private school representative, the sections of the PLAN should develop naturally based on the matters discussed. The PLAN sections essentially mirror the required points of consultation found in the CHECKLIST.

In the footer on each PLAN page, enter: (1) the names of the district and of the private school, and (2) the page number.

**ASSURANCE and WRITTEN AFFIRMATION :** The private school must agree and assure, through the ASSURANCE acknowledgement, that use derived from equitable services will be secular, neutral and nonideological. Finally, a WRITTEN AFFIRMATION is provided for the private school to indicate agreement or disagreement with the PLAN and sign the PLAN form.

ESSERF requires the FINAL EQUITABLE SERVICES PLAN (including the private school’s ASSURANCE and WRITTEN AFFIRMATION) to be conveyed to the State Ombudsman. When the district has secured the WRITTEN AFFIRMATION from the private school, upload to your MCAPS LEA DOCUMENT LIBRARY, Equitable Services section, in the ESSERF materials subfolder. If the private school marked Disagree, both parties should immediately notify the Ombudsman.

You may contact the State Ombudsman at MDE OFP with any questions about this form or associated materials.

(These instructions are not part of the Plan document.)

END INSTRUCTIONS

[Name of School District – Name of Private School]

**ESSERF FINAL EQUITABLE SERVICES PLAN**

The CARES Act Elementary and Secondary Schools Emergency Relief Fund (ESSERF), requires that timely and meaningful consultation occur between the Local Educational Agency (the public school district) and private school officials prior to any decision that affects the opportunities of eligible private school children, teachers, and other educational personnel to participate in ESSERF equitable services. Consultation shall continue throughout the implementation and assessment of activities.

The result of the consultation process is the district’s ESSERF Final Equitable Services Plan for the individual private school, which must be transmitted to the State Ombudsman along with the private school’s Written Affirmation thereof. The district is the decision-making authority regarding delivery of services, but shall provide the private school with equitable services “as requested by the private school officials to best meet the needs of such children.” The goal of consultation is agreement on how to provide equitable services, with the resulting agreement embodied in this Plan. A dispute resolution procedure is available to resolve any disagreements. The private school may initiate a dispute by marking “Disagree” on the Written Affirmation. If this occurs, both parties should immediately notify the State Ombudsman.

The district must upload the ESSERF Final Equitable Services Plan and Written Affirmation to its MCAPS LEA Document Library, in the Equitable Services section, to the ESSERF Plan subfolder.

**Parties to this ESSERF FINAL EQUITABLE SERVICES PLAN**

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| **School District** | **Private School** |
| District name: | Private School name: |
| District address: | Private School address: |
| District Representative:  | Private School Representative: |
| Phone: | Phone: |
| Email: | Email: |

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| **(1)** Size and scope: Identify the private school’s amount of ESSERF equitable share, and how that amount is determined. |
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| **(2)** Identify whether single-school services will be provided, or whether a “pooling” plan will be in place: |
| [ ]  Single-school services are being provided to this specific private school. |
| [ ]  A “pooling” plan will be used, involving pooled funding for multiple private schools, all of whom agree to the pooling. Describe: |

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| **(3a)** What specific needs have been identified by the private school?  |
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| **(3b)** What services will be provided in response to these needs? |
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| **(4)** If applicable, describe where, when, by whom and how the assistance will be provided. If applicable, identify whether services will be provided by School District personnel, private school teachers in the capacity of School District personnel and working outside normal school hours, third-party contractors, or otherwise. Discuss possible options, if applicable. |
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| **(5)** If applicable, how will the identified services/assistance be academically assessed (indicate data source); if applicable, how will assessment results be used to effect improvement? |
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| **(6)** How will the school district make decisions about problems with delivery of services?  |
| If the school district or private school becomes aware of any service-delivery failures or other program failures, the school district will move to immediately correct or replace the source of the failure. If the district is unresponsive to private school complaints, the private school should contact the State Ombudsman at the Mississippi Department of Education, Office of Federal Programs.**Other considerations, if any:**  |

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| **(7) Written Disagreements:** If any disagreement involving any of the above points ESSERF consultation remains unresolved when the school district submits this ESSERF Final Equitable Services Plan to the private school for inspection, the district will provide a written explanation of the disagreement and analysis of the reasons for the district’s decision to overrule the private school’s request or point of view. This written explanation of disagreement shall be attached to the ESSERF Final Equitable Services Plan, and the private school will have an opportunity to agree or disagree, with disagreement initiating the dispute resolution process (notify the State Ombudsman)**.** **Has the district attached a written disagreement? Yes / No. If Yes, how many? \_\_\_** |

**The foregoing PLAN is hereby certified by the undersigned District Representative as true and correct:**

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| **District Representative’s Title** | **Print District Rep’s Name** | **District Rep’s Signature** | **Date** |
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The following page is the final page of this Plan, being the *Private School’s Written Affirmation of Consultation and Agreement or Declaration of Disagreement.* It must be completed by the private school representative after his/her review of the finalized Plan.

Instruction:

The following *Private School’s Assurance* and *Private School’s Written Affirmation of Consultation and Agreement or Declaration of Disagreement* form must be conveyed to the private school with the Final Equitable Services Plan and is thus included as the final page of the Plan. After reviewing the finalized Plan, the private school representative must return the marked and signed form to the district. The district then forwards the Plan and Written Affirmation to the State Ombudsman via upload to MCAPS. A separate Written Affirmation form will accompany each PLAN form if the district is providing equitable services for multiple ESSA programs (use a separate PLAN form for each program).

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| **Private School’s Assurance (required)** |
| **Private school representative: To indicate agreement, place an “X” in the location of the box.**[ ]  In consideration of equitable participation in ESSERF funds, and as a requirement thereof, the Private School, through its representative identified below, agrees and assures that all use derived therefrom will be secular, neutral and nonideological in accordance with CARES Act section 18005(a) and ESEA section 1117(a)(2) [20 U.S.C. 6320(a)(2)].\* |

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| **Private School’s Written Affirmation of Consultation and Agreement, or Declaration of Disagreement** |
| **This portion to be completed by the private school representative after receipt of the school district’s *ESSERF* *Final Equitable Services Plan*. Place an “X” in the location of a box.****AGREEMENT**[ ]  The private school, through its representative, hereby agrees that timely and meaningful consultation occurred, and the program design represented in the district’s *ESSERF Final Equitable Services Plan* appears equitable.**- or -****DISAGREEMENT**[ ]  The private school, through its undersigned representative, hereby declares its belief that timely and meaningful consultation regarding equitable services **did not occur**.[ ]  The private school, through its undersigned representative, hereby declares its belief that the program design represented in the district’s *ESSERF Final Equitable Services Plan* **is not equitable**. **If the private school declares a disagreement, the State Ombudsman will make contact to begin dispute resolution.**

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| **Private School Name** | **Print Representative’s Name** | **Representative’s Signature\*** | **Date** |
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\*My typed name is adopted as my electronic signature

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