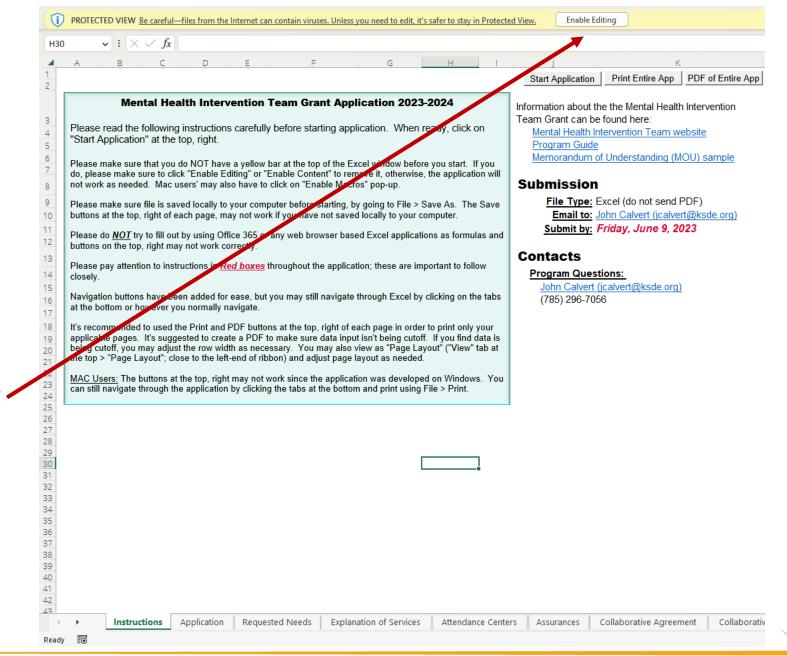
2023-2024 MHIT Application Technical Assistance



Welcome, this guide will instruct you slide by slide on how to fill out our KSDE 2023-2024 Mental Health Intervention Team Application.

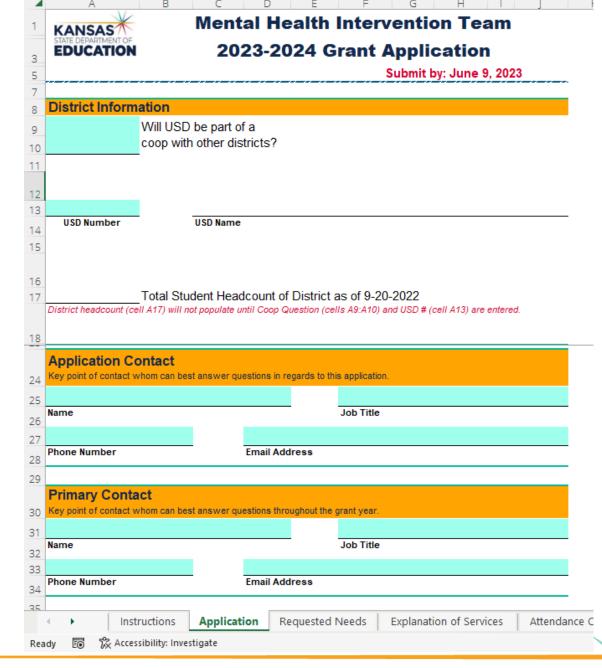
To start: You may need to click the "Enable Edit" • button on the top



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Rule of Thumb: Fill in ALL "Aqua" colored cells

Drop down menu: Will USD be apart of Co-op? Enter all information in Aqua Cells. Other information will auto populate. Need information for Application, Primary, and Financial Contact even if they are the same people.



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How many F/T or P/T Liaisons are you going to be applying for?

What is the FTE of the P/T positions?

Line 1-4: Enter the TOTAL amount of salary and benefits requested.

Line 5: Total of Salary and Benefits

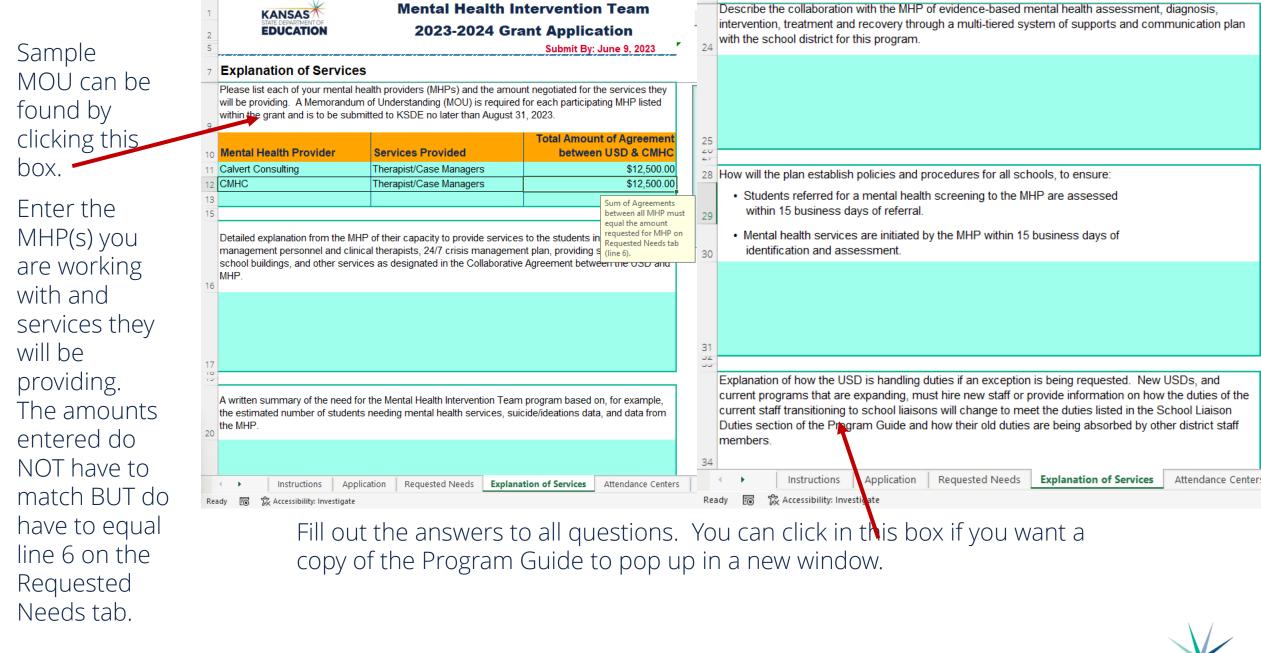
Line 6: 25% of Line 5 is what the school must pay for their Liaison.

Line 7: 75% of the grant amount requested is drawn down monthly by the school for Liaison salary/benefits.

Line 8: 25% of the grant amount requested serves as flow through money through the USD to the MHP.

Line 10: Is the total grant amount which includes Liaison salary/benefits and the MHP portion.

1		KANSAS Mental Health Intervention Team						
<u>'</u>		EDUCATION 2023-2024 Grant Application						
2 5		Submit By: June 9, 2023						
7	Re	quested Needs						
8		School Liaison Request	Full-Time	Part-Time	Tota			
9		School Liaison Headcount	2					
10	*F	ull-Time Equivalency (FTE)	1.0	0.5	1.5			
11	*Ple	ase submit FTE to the nearest tenth	(one decimal)					
12								
13	Fir	nancial Request						
		Function			Amount Requested			
14		Object			(\$)			
16		2100 Student Support Servic	es					
17	100* Salary							
	1	1 *Enter 100% of the school liaisons estimated salary for 2023-2024 (exclude Employee \$90,000.						
18		Benefits; enter on lines 3-5)						
19		2100 Student Support Services						
20		200 Employee Benefits						
21	2	210 Insurance \$5,000.0						
22 23	3	220 Social Security \$3,000.00 290 Other \$2,000.00						
	4							
24	5	School Liaison Total Budg	et Request		\$100.000.00			
24	5							
25	6	School Liaison Local Match (25% of Line 6)		\$25,000.00			
	6 7		25% of Line 6) Requested (75% of Line 6)		\$25,000.00			
25 26	6 7	School Liaison Local Match (School Liaison Grant Amount	25% of Line 6) Requested (75% of Line 6) P)		\$25,000.00			
25 26 27	6 7	School Liaison Local Match (School Liaison Grant Amount Aental Health Provider (MH	25% of Line 6) Requested (75% of Line 6) P) es		\$25,000.00 \$75,000			
25 26 27 28 29	6 7	School Liaison Local Match (School Liaison Grant Amount Jental Health Provider (MH 2100 Student Support Servic	25% of Line 6) Requested (75% of Line 6) P) es nal & Technical Services		\$25,000.00 \$75,000			
25 26 27 28	6 7	School Liaison Local Match (School Liaison Grant Amount Aental Health Provider (MH 2100 Student Support Service 300 Purchased Profession 25% of School Liaison Total Buc	25% of Line 6) Requested (75% of Line 6) P) es nal & Technical Services lget Request (Line 3)		\$25,000.00 \$75,000 \$25,000			
25 26 27 28 29 30	6 7 N 8	School Liaison Local Match (School Liaison Grant Amount Aental Health Provider (MH 2100 Student Support Service 300 Purchased Profession	25% of Line 6) ERequested (75% of Line 6) P) es nal & Technical Services Iget Request (Line 3) ed (Line 8 + Line 9)		\$100,000.00 \$25,000.00 \$75,000 \$25,000 \$25,000 \$100,000 \$125,000			



ĸ	ANS	AS	Mental	Health Interver	ntion Tea	m	Save & Previous	Save	Save & Next	Print Page	PDF of Page	Instructions
E		ATION	2023	-2024 Grant Ap	plication		Please input	Aqua cells	as applicable.	Print Entire App	PDF of Entire App	msuucuons
					Submit b	y: June 09, 2023	Enter the USD N	lumber on the le	ft, and that will narrow you	ır Bldg # code to just	those in that district.	
			Centers centers that will be served I	by school liaisons during th	e 2023-2024 so	chool year.	Headcount and I	Free Lunch %.	git building number in colu you're not sure what the uilding Data" tab on the fa	building numbers an	e, you can view all vali	d buildings for
				9/20/202 Studen		2022-2023 22 Foster Care Student	attending these I Student Headco	buildings are inc unt for these bui	unt and Free Lunch Perc uded in other buildings w dings if applicable.	ithin the USD. Pleas	e go ahead and enter t	the Foster Car
U	SD #	Bldg #	Building Name	Headcou	Int Lunch 9	% Headcount	Cells in columns B	& C will turn red i	f the building is listed more t	nan once. Please mak	e sure to only list building	one time.
1	337		•									
		3909 3910	ligit									
		3911 3912	lilding									
		3913 3914										
		3916	ī									
		3918										
		Instru	ctions Application Rec	uested Needs Explanatio	n of Services	Attendance Centers	Assurances	Collaborative A	greement Collaborat	ive Agreement (2)	Collaborative Agree	ment (3)

Enter the buildings that will be served by the grant. If you enter the USD number first, you can select the building numbers only associated with that district. You will also need to enter the foster care headcount for that building. Everything else will auto generate. If you need help with building information, click on the Building Data tab at the bottom.

The Assurances Page is an agreement between the Superintendent and the MHIT Coordinator/Director/Liaison that the three bullet points will be met. Typing your name/date certifies your signature in agreement.

KANSAS EDUCATION

Mental Health Intervention Team 2023-2024 Grant Application

Submit by: June 9, 2023

Assurances

The signature page signed by the Superintendent and MHIT Program Coordinator/Director certifies the applicant's agreement to the following sets of assurances. Typing your name below is considered your electronic signature. Your signature is certifying the data as accurated when submitted to KSDE.

Please read completely before signing.

12 For the duration of the 2023-2024 performance period, the district shall:

- Use fiscal control and accounting procedures to ensure proper disbursement of, and accounting for, state funds paid to such applicants under this program.
- · Submit reports as specified by KSDE and require School Liaisons to be trained on the MHITS Portal (online student data system).
- · Maintain records to substantiate program and funding compliance and afford access to such records as needed by KSDE.

10

I hereby certify this information is accurate to the best of my knowledge.

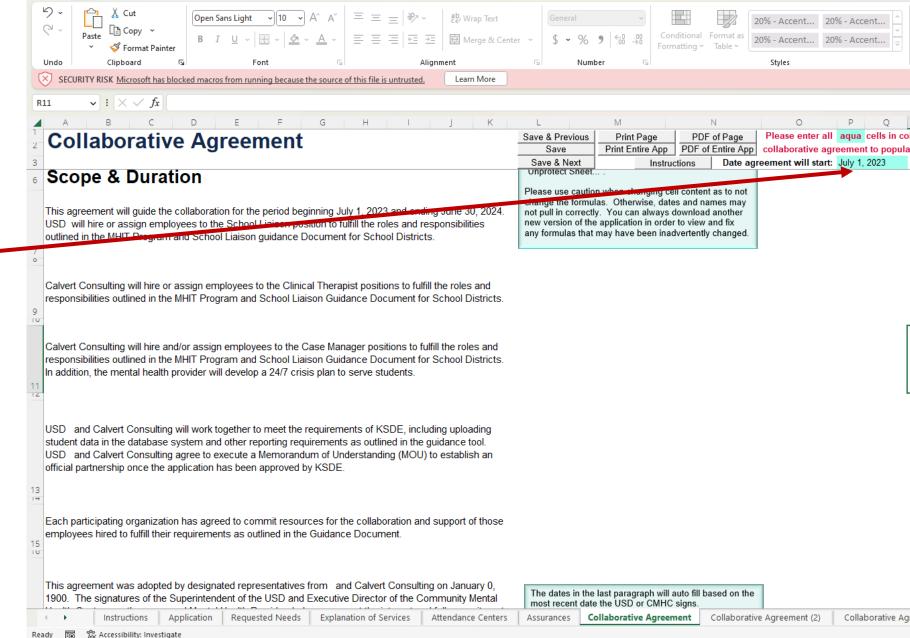
14 Typing your name below is considered your electronic signature.

15							
16							
17	USD Number	USD Name					
18							
19							
20	Date	Signature of Superintendent					
21							
22							
23	Date	Signature of MHIT Coordinator/Dire	ector				
	Instructions	Application Requested Needs	Explanation of Services Attendance Center				
Rea	Ready 🐻 🔀 Accessibility: Investigate						
1	Kanaga landa tha warld in the success of each student						

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The Collaborative Agreement is between the USD and the MHP. Please enter the date the agreement will start in the aqua cell in the top right.-The Agreement will auto populate, and both parties will need to type their name/date at the bottom. There are 3 agreement tabs at the bottom. Only ONE agreement needs to

be filled out PER MHP.



Acrobat

File

Home

Insert Page Layout

Formulas

Review

Automate

Once completed, please save/email to John Calvert (jcalvert@ksde.org) in an EXCEL format. Submitting the application in an incorrect format could be subject to rejection.

Applications are due **NO LATER** than June 9th at 5:00pm.

If you don't receive a confirmation receipt within 48 business hours, please contact John Calvert to check.

MOUs are due NO LATER than August 31 at 5:00pm.

Documents are posted on the MHIT Website: MHIT Website

If you have any questions/concerns, PLEASE don't hesitate to contact: John Calvert <u>jcalvert@ksde.org</u> 785-296-7056