

Non-Portal Application

Office of Religious & Independent School Support (ORISS)

Mathematics, Science, and Technology (MST) Teachers Reimbursement Grant Y7, 2023-2024

Part I: Religious or Independent School Information

School Name									
School Address									
Affiliation*									
LEA District Name*									
School BEDS Code									
OSC Vendor ID*									
NYSED Institution ID*8000000									

Complete the application below.

- All eligible MST teacher information will be grouped together in a single application.
- Pages 1 & 5 only need to be completed once per BEDS Code.
- Please print and complete page 2 for all MST teachers (duplicate if more space is required).
- Pages 3 and 4 will need to be reproduced and completed for **each** teacher.
- ORISS must RECEIVE the complete application by August 1, 2024.
- Late applications will be deemed ineligible and will not be reviewed.
- Please see the MST Y7 Guidance & Resource Documents for further information.

^{*}Refer to the Application Instructions, pages 6 & 7, for instructions on how to find this information on SEDREF.



Chief Administrator

Application Contact

Teacher Attestation

Office of Religious & Independent School Support (ORISS)

Funding Opportunities

The information provided below, and evidence reported throughout this reimbursement application is just and correct, in accordance with all applicable statutes, regulations, and guidelines.

I hereby attest that each teacher listed below provided teaching services:

- at the listed religious and/or independent school.
- in the grant reimbursement subject matter.
- to the grant reimbursement grade levels.
- that are secular, neutral, and non-ideological.

School Name:

using curricula that are guided by the New York State Learning Standards.

acher(s) list	ed helow DO NO)T in any ca	inacity prov	ride non-secular in	struction
Last Name	First Name	Grade	Subject	Signature	Date
	acher(s) list				acher(s) listed below DO NOT, in any capacity, provide non-secular instance Last Name First Name Grade Subject Signature

Teacher's Full Name:	
Maiden Name or Former NamesÁ V •^åE	

Provide the schedules that were used consistently throughout the ^} $\frac{d^2 + d^2 +$

	Teacher's Schedule							
Subject(s) taught	Grade levels taught in each subject area	List specific course(s) taught in subject area	How many instructional hours per week does the teacher instruct in each subject taught?					
☐ Mathematics			# ofÁ @ `¦∙K					
☐ Science			# ofA @ '¦∙K					
☐ Technology			# ofÁ @ `¦∙K					

A teacher who provides non-secular instruction in any capacity is not eligible for reimbursement.

^{*}If the name on the application differs from diploma, certification, or any of the requested documents, please submit change of name documentation (marriage license or notarized statement signed by the teacher applicant).

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Uæd	$ \mathcal{Q}X $	A	eacher	Qua	lifica	tions	/Edu	ıcation

Teacher Name:	

ECT <u>ONE</u> OF THE FOLLOWING THREE ELIGIBILITY CHOICES FOR THIS TEACHER AND SUBMIT THE REQUIRED DOCUMENTARY ENCE INCLUDING THE SCHOOL'S MASTER SCHEDULE.
to the MST Documentary Evidence Y7 for details
Certified to teach in NYS pursuant to Section 3004 of Education Law
☐ Copy of the school's 2023-2024 master schedule for all applications
□ Religious and independent school course descriptions for courses listed above, with evidence that curricula are guided by the New York State Learning Standards
□ Copy of teacher's valid and current NYS Teacher Certificate(s)
□ Copy of the teacher's schedule for the 2023-2024 school year
☐ Signed employment agreement including yearly salary or other evidence of employment by the religious or independent school, signed by both teacher and school administrator
Holds a Master's degree or Ph.D. in Mathematics, Science, Technology, or Education
□ Copy of the school's 2023-2024 master schedule for all applications
□ Religious and independent school course descriptions for courses listed above, with evidence that curricula are guided by the New York State Learning Standards
□ Official documentation from a college or university stating a master's degree or Ph.D. has been earned in an eligible program
□ Copy of the teacher's schedule for the 2023-2024 school year
□ Signed employment agreement including yearly salary or other evidence of employment by the religious or independent school, signed by both teacher and school administrator
Holds a Bachelor's degree in Mathematics, Science, Technology, or Education and is currently enrolled in a master's or Ph.D. program in
Mathematics, Science, Technology, or Education (within 5 years from the date of April 10, 2019 or the employment start date with the school)
☐ Copy of the school's 2023-2024 master schedule for all applications
□ Religious and independent school course descriptions for courses listed above, with evidence that curricula are guided by the New York State Learning Standards
☐ Official documentation from a college or university stating a bachelor's degree has been earned in an eligible program
□ Official documentation from a college or university stating the teacher is currently enrolled (in the 2023-2024 school year) in an eligible master's or Ph.D. program
☐ Copy of the teacher's schedule for the 2023-2024 school year
□ Signed employment agreement including yearly salary or other evidence of employment by the religious or independent school, signed by both teacher and school administrator

Úæ Ó Kacertification

I hereby certify that said teacher provides instruction in mathematics, science, or technology in any grades from three through 12, using curricula that are guided by the New York State Learning Standards, and is employed by the nonpublic school. I certify that the evidence reported is in accordance with all applicable statutes, regulations, and guidelines; that the school at which the services were performed is not a for-profit entity; and that the claim is just and correct. Teaching services provided are secular, neutral, and non-ideological. The teacher who is the subject of this application does not provide non-secular instruction in any capacity.

Signature of Chief Administrator	Chief Administrator Name (PLEASE PRINT)	Date
	,	
Contact Information		
Person Completing Form (PLEASE PRINT)	Title of Person Completing Form	Telephone Number
Email Address	Fax Number	Signature of Person Completing Form

We must RECEIVE the complete application in our office by TUESDAY, August 1, 2024.

Late, incomplete or inaccurate applications will be deemed ineligible and may not be reviewed. ONLY one copy of the School's Master Schedule is required for your application to be reviewed.