Non-Portal Application

Office of Religious & Independent School Support (ORISS)

Art and Music (AMTS)
Teachers Reimbursement Grant Y1, 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 AMTS 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 AMTS 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 AMTS Y1 Guidance & Resource Documents for further information.**

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

APPLICATIONS MUST BE SUBMITTED via EMAIL at AMTS-ORISS@nysed.gov

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.
- using curricula that are guided by the New York State learning standards.

School Name: _____

12-Digit BEDS Code : _____

Teacher(s) listed below DO NOT, in any capacity, provide non-secular instruction.

Role	Last Name	First Name	Grade	Subject	Signature	Date
Teacher						
Teacher						
Teacher						
Teacher						
Teacher						
Teacher						
Teacher						
Teacher						
Teacher						
Teacher						

Role	Last Name	First Name	Telephone	Signature	Date
Chief Administrator					
Application Contact					

Part III: Teacher Information

Teacher's Full Name:	
Maiden Name or Former Names Used*	

*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).

Provide the schedules that were used consistently throughout the entire academic year. For this purpose, instructional time (hours) is defined as time that a teacher is teaching a curriculum to students. Supervisory duties (e.g., homeroom, study hall, bus monitoring) and scheduled planning periods are not considered instructional time.

Teacher's Schedule			
Subject(s) taught	Grade levels taught in each subject area	List the titles of the AMTS course(s) taught in subject area	How many instructional **hours** per week does the teacher instruct in each subject taught?
☐ Art			# of **hours**:
☐ Music			# of **hours**:
	(grades k-12 eligible)		

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

Part IV: Teacher Qualifications/Education

Teacher Name:	

SELECT **ONE** OF THE FOLLOWING THREE ELIGIBILITY CHOICES FOR THIS TEACHER AND SUBMIT THE REQUIRED DOCUMENTARY EVIDENCE INCLUDING THE SCHOOL'S MASTER SCHEDULE.

Refer to the AMTS Documentary Evidence Y1 for details

☐ 1. **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

☐ 2. **Holds a master's degree or Ph.D. in Dance, Theater, Visual or Media Arts, Fine Arts, Music, or Education (D,T,VoMA, FA, M o E)**

- ☐ 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

☐ 3. **Holds a bachelor's degree in D,T,VoMA, FA, M o E and is currently enrolled in a master's or Ph.D. program in D,T,VoMA, FA, M o E**
(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

Part V: Certification

I hereby certify that said teacher provides instruction in art or music in any grades from K 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.