

# AWSYC HEAD START FY23 COLA & QI GRANT APPLICATIONS

April 11, 2023

## **SUMMARY:**

This item requests approval of the Head Start COLA (Cost of Living Adjustment) and QI (Quality Improvement) grant applications for FY23.

## **Board Goal:**

- I. **Vision...**In pursuit of excellence the district will
  - b. Develop and maintain a culture where learning remains our first priority.
  - e. Develop a budget focused on student and professional learning.
- VI. **Growth, Change, and Fiscal Responsibility...**In pursuit of excellence the district will
  - e. Demonstrate effective and efficient management of district resources.
  - f. Provide leadership and/or oversight to ensure District meets all fiscal, legal, and regulatory requirements.

## **PREVIOUS BOARD ACTION:**

- None

## **BACKGROUND INFORMATION:**

- Head Start requires the Governing Body approve the grant applications.

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## **SIGNIFICANT ISSUES:**

-None

## **FISCAL IMPLICATIONS:**

- COLA funding for permanent salary increase for Head Start employees as well as substitutes and QI funding to be used to improve our efforts for ongoing purposes in helping to meet identified needs of our Head Start students and families.

## **BENEFIT OF ACTION:**

Passage will document the Governing Body's approval of the Head Start COLA grant and QI grant applications for FY23.

## **PROCEDURAL AND REPORTING IMPLICATIONS:**

- The Governing Body's review of these documents demonstrates active involvement in Denton ISD's Head Start Program.

## **PUBLIC COMMENT RECEIVED:**

- Comments received from the public through the AWSYC Head Start Policy Council.

## **ALTERNATIVES:**

- No alternative actions are proposed.

## **OTHER COMMENTS:**

- None

## **SUPERINTENDENT'S RECOMMENDATION:**

Recommend approval of the Head Start COLA and QI grant applications

## **STAFF PERSONS RESPONSIBLE:**

- Angela Hellman, Head Start Director, AWSYC

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## **ATTACHMENT:**

FY23 COLA Grant Application  
FY23 QI Grant Application

**APPROVAL:**

Signature of Staff Member Proposing Recommendation: \_\_\_\_\_

Signature of Divisional Assistant Superintendent: \_\_\_\_\_

Signature of Superintendent: \_\_\_\_\_