**State Seal and Virginia Department of Education title**

# FISCAL YEAR 2021

# APPLICATION FOR THE GROW YOUR OWN TEACHER PILOT PROGRAM

**Deadline for Applications: April 9, 2021**

## Contact information:

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Department of Teacher Education and Licensure

Virginia Department of Education

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### VIRGINIA DEPARTMENT OF EDUCATION

### COMPETITIVE GRANT APPLICATION PACKET

**Issue Date: July 1, 2020**

**Title: FY 2021 Grow Your Own Teacher Pilot Program**

**Issuing Agency: Physical Address:**

**Virginia Department of Education**

**Department of Teacher Education and Licensure**

**James Monroe Building – 24th Floor**

**101 North 14th Street**

**Richmond, Virginia 23219**

**Mailing Address:**

**Virginia Department of Education**

**Department of Teacher Education and Licensure**

**P. O. Box 2120**

**Richmond, Virginia 23218-2120**

**Issued to: School divisions in all regions of the state may apply.**

**In the selection process, the Virginia Department of Education will consider the geographic distribution of grant recipients. At least one school division within each of the eight superintendent regions, applying for such grants, will be awarded prior to awarding grants to multiple school divisions within a single superintendent region. Each superintendent region shall be permitted to apply for up to four grant awards.**

**Purpose of Grant: To provide a stipend per academic year, for up to four years (contingent upon available funding), for individuals who graduated from a public high school, were eligible for free lunch, and teach for a period of at least four years at a school in the division in which the individual graduated high school.**

**Funding Authority: Virginia General Assembly**

**Amount of Grant: $7,500 per academic year for up to four years**

**(Grant awards are subject to available funding.)**

**Grant Period: July 1, 2020 – June 30, 2021**

**Submission Deadline: 4 p.m., April 9, 2021**

**SUBMISSION OF APPLICATIONS:**

In order to be considered for selection, applicants must submit a completed VDOE Grow Your Own Teacher Form to their employing school division’s Human Resources Office. Human Resources Directors must submit completed application forms to their Superintendent. All applicants will be evaluated by the process established by each Superintendent’s Region to select regional nominees. Each Superintendent’s Region will determine its own process to select regional nominees based on the guidance issued in Superintendent’s Memo #037-21. The regional selection application materials must be submitted via email to [Maggie.Clemmons@doe.virginia.gov](mailto:maggie.clemmons@doe.virginia.gov). (The subject line in the email should read, GRANT APPLICATION FOR GROW YOUR OWN TEACHER PILOT PROGRAM). Please note: The regional selection applications must be received **no later than 4 p.m., Eastern Daylight Time, on April 9, 2021**. Applications received after the deadline will not be accepted unless the deadline is modified by the Department of Teacher Education and Licensure.

Please direct all inquiries, questions, and requests for information to: Mrs. Maggie M. Clemmons, Director of the Office of Licensure and School Leadership, Virginia Department of Education, either by email to [Maggie.Clemmons@doe.virginia.gov](mailto:maggie.clemmons@doe.virginia.gov) or phone (804) 371-2476.

**Note: The Virginia Department of Education does not discriminate on the basis of race, sex, color, national origin, religion, age, political affiliation, veteran status, or against otherwise qualified persons with disabilities in its programs and activities.**

##### APPLICATION REQUIREMENTS

#### PURPOSE AND BACKGROUND

The 2021 General Assembly is anticipated to provide a final fiscal year 2021 appropriation of $240,000 in the first year for the Grow Your Own Teacher Pilot Program. The Virginia Department of Education (VDOE) is seeking applications for this pilot program that provides grants to low-income high school graduates who attended an institution of higher education in the Commonwealth and subsequently teach in a high-need public school in the school division in which they graduated from high school.

#### II. APPLICATIONS

Applicants must complete the VDOE Grow Your Own Teacher Application Form. The form includes:

* 1. Applicant’s contact, high school, college, and license information.
  2. School division’s superintendent (or designee) certification.

#### III. SPECIFIC APPLICATION INSTRUCTIONS

1. Teachers may apply for this grant by completing the VDOE Grow Your Own Teacher Pilot Program Form and submitting it to the Human Resources Office in the school division in which they are employed.
2. The employing school division is responsible for verifying the applicant meets all criteria.
3. School division Human Resources Directors must submit completed Grow Your Own Teacher Application Forms to their division superintendent/designee for certification. Forms collected at the division level will then be forwarded to the Superintendent’s Region for further consideration.
4. Each Superintendent’s Region should establish its own process to select up to four applicants for the Grow Your Own Teacher pilot program based on the criteria identified below:
   * + the teacher graduated from a public high school in the school division in which they are currently employed;
     + the teacher was eligible for free lunch during the applicant's attendance at a public high school in the local school division; and
     + the teacher is teaching, within one year of graduating from an institution of higher education in the Commonwealth, with a commitment to teach for a period of at least four years, at a public school at which at least 50 percent of students qualify for free lunch in the school division in which such individual graduated from high school.

1. Regions should give priority to teachers who hold a renewable five- or ten-year teaching license and to those who fill a critical teacher shortage areas when submitting teachers' names recommended to receive a grant award.
2. Regional selections must be submitted to the Office of Licensure and School Leadership no later than close of business April 9, 2021. Once the Office of Licensure and School Leadership selects award recipients, the State Council of Higher Education will contact the school division and award recipients and ensure award disbursement.

#### IV. REVIEW PROCESS

As regionally selected applications are received at the Department, they will be reviewed by staff for completeness. If, in the judgment of the Department, an application is late or significantly incomplete, the proposal will be omitted from the review process. The decision of the Department is final. School divisions that submit applications that are withdrawn due to incompleteness or ineligibility will be notified in writing.

A review panel will evaluate eligible applications based on the required application components and the established criteria. The review panel will review each eligible application and make recommendations regarding final selections to the State Council of Higher Education for Virginia, which is the fiscal agent for the state appropriation. The Virginia Department of Education may consider prioritizing the applicants employed in the highest-need divisions and the geographic distribution of applicants when making final decisions for the pilot program.

##### APPENDICES

**Virginia Department of Education   
 FY 2021 GROW YOUR OWN TEACHER PILOT PROGRAM**

**APPLICATION FORM**

The 2021 General Assembly is anticipated to provide a final fiscal year 2021 appropriation of $240,000 in the first year for the Grow Your Own Teacher Pilot Program. This pilot program will provide grants to low-income high school graduates who attended an institution of higher education in the Commonwealth and subsequently teach in high-need public schools in the school divisions in which they graduated from high school.

**TEACHER INFORMATION:**

Last Name:

First Name:

M.I.:

License Number:      -

Street Address:

Apt #:

City:

State:

ZIP:

Gender:

Phone:

Email Address:

**HIGH SCHOOL INFORMATION:**

High School:

High School Graduation Year:

Address:

Phone:

School Division:

Eligible for Free Lunch During Attendance (Y/N)?:

Principal:

Email Address:

**COLLEGE/UNIVERISTY INFORMATION (List all degrees earned):**

College(s)/University(ies):

College Graduation Year(s):

**TEACHER SIGNATURE:**

*I certify that the information on this form is accurate and complete, and I meet the criteria to be considered for an award.*

Teacher Signature:

Date:

**SUPERINTENDENT’S CERTIFICATION OF APPLICANT:**

**ATTENTION HUMAN RESOURCES DIRECTORS:** **Human Resources Directors must submit completed application forms to their Superintendent.** All applicants will be evaluated by the process established by each Superintendent’s Region to select regional nominees. Each Superintendent’s Region will determine its own process to select regional nominees based on the guidance issued in Superintendent’s Memo #037-21. Regional nominees should be submitted to the Office of Licensure and School Leadership by April 9, 2021 for review.

I certify that the teacher named above has met the criteria for the grant, and I recommend the teacher for a grant award.

School Division:

Superintendent’s Region:

Superintendent’s Signature:

Date:

Superintendent’s Name: