

# **Non-Portal Application**

Office of Religious & Independent School Support (ORISS)

# Mathematics, Science, and Technology (MST) Teachers Reimbursement Grant Y8, 2024-2025

## 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										
Number of Teachers in application:										

#### Complete the application below.

- All eligible MST teacher information will be grouped together in a single application.
- Pages 1, 2, & 3 only need to be completed once per BEDS Code.
- Please print and complete page 6 for all MST teachers (duplicate if more space is required).
- Pages 4 and 5 will need to be reproduced and completed for <u>each</u> teacher.
- ORISS must RECEIVE by EMAIL the complete application by August 1, 2025.
- Late applications will be deemed ineligible and will not be reviewed.
- Do NOT mail or fax the application. Please only send via email at MST-ORISS@nysed.gov.
- Please see the MST Y8 Guidance & Resource Documents for further information.

<sup>\*</sup>Refer to the MST Application Instructions, pages 6 & 7, for instructions on how to find this information on SEDREF.

## Part II: School & Contact Information

Is this a 853 or 4201 school?  ☐ Yes ☐ No	
Has your school had any of the following Please check all that apply (leave to Name Change  Change of Address  BEDS Code Change  OSC Vendor Id has changed  School is scheduled to close at a Other	plank if not appicable):
If the "Other" box was checked plea	ase elaborate.
<ul> <li>Every course taught at the</li> <li>Every teacher teaching at t</li> <li>All grades enrolled in the s</li> <li>Schedules for the entire so</li> <li>School master schedule m</li> </ul>	ool master schedule (including in person, remote, hybrid). the following information: school (including those ineligible for MST funding), specifying the course name, time & grade level the school (whether or not included in the MST application), identified by name or initials chool building thool year, including all terms/quarters ust match the individual teacher's schedule the type of master schedule your school uses, please refer to the MASTER SCHEDULE SELECTION TOOL on the
What type of Master Schedule was this school year.	used in 2024-2025? Check the schedule type that most closely resembles the schedule that your school used fo
<ul> <li>□ 4x4 Block</li> <li>□ A/B Block</li> <li>□ Flex Mod</li> <li>□ Hybrid: Modified Block</li> <li>□ Hybrid Modified Standard</li> <li>□ Intensive Block</li> <li>□ Other</li> </ul>	<ul> <li>□ Rotating (4x4) Block</li> <li>□ Rotating Standard</li> <li>□ SED supplied template for 2024-2025</li> <li>□ Standard Periods</li> </ul>

If the "Other" box was checked, what is the name of your master schedule type and provide any deta	ils that might help the reviewer.
How many terms did your school have this school year (smester, trimester, quarters, etc.)?	
How many days are included in your current schedule (4,5,8,ect.)?	
How many periods are taught in a day?	
Is this the number of periods that are taught every day?	
If the answer is no, please elaborate.	
In the different to the, produce elaborate.	
What is your period length (instructional time)?	
Do you have consistent period lengths each day?	
If the answer is no, please elaborate on the changing period lengths.	

#### Part IV: Teacher & Course Information

Teacher's Full Name:	
Number of Teachers being claimed:	
Teacher Number: (Assign each teacher a # so reviewer can confirm all teacher info was received)	
Maiden Name or Former Names Used*	

Provide the schedules that were used consistently throughout the entire academic year. Make sure the teacher schedule includes all the courses that the teacher taught (not just the ones being claimed) as well as period length for all classes (If time of instructional periods is not indicated on the master schedule please include a copy of your daily bell schedule). Also include a copy of the matrix for your master schedule if applicable. For this grant's 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. Individual schedule should not just be a screenshot taken directly from the master schedule.

	Teacher's Schedule								
Subject(s) taught	Grade levels taught in each subject area	List the titles of the MST course(s) taught in subject area and provide a copy of the COURSE DESCRIPTIONS.	How many instructional <b>hours</b> per week does the teacher instruct in each subject taught?						
☐ Mathematics			# of hours:						
☐ Science			# of hours:						
☐ Technology			# of hours:						

<sup>\*</sup>grades 3-12 are eligible

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

<sup>\*</sup>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).

<sup>\*</sup>Any class held after school is ineligible

### Part V: Teacher Qualifications/Education

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

Re

☐ 1. Certified to teach in NYS pursuant to Section 3004 of Education Law
☐ Copy of the school's 2024-2025 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 learnin standards
☐ Copy of teacher's valid and current NYS Teacher Certificate(s)
☐ Copy of the teacher's schedule for the 2024-2025 school year
☐ Signed employment agreement including yearly salary or other evidence of employment by the religious or independent school, signed by both teach and school administrator
□ 2. Holds a master's degree or Ph.D. in Mathematics, Science ,Technology or Education
☐ Copy of the school's 2024-2025 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 learnin standards
☐ Official documentation from a college or university stating a master's degree or Ph.D. has been earned in an eligible program
$\square$ Copy of the teacher's schedule for the 2024-2025 school year
□ Signed employment agreement including yearly salary or other evidence of employment by the religious or independent school, signed by both teach and school administrator
3. 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, 2020 or the employment start date with the school)  Copy of the school's 2024-2025 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 2024-2025 school year) in an eligible master's or Ph.D. program
☐ Copy of the teacher's schedule for the 2024-2025 school year
☐ Signed employment agreement including yearly salary or other evidence of employment by the religious or independent school, signed by both teach and school administrator

For the Masters & Bachelor tracks degree must be an eligible US Degree or Eligible Foreign Degree verified by a NYS Office of Teaching Initiatives (OTI) Approved Service.

Please refer the MST anticipated approved subject list on the MST Guidance & Resource Documents page for more information on eligible degrees for this grant.

For foreign degrees, please provide a valid foreign credential report from an approved vendor from the New York State Office of Teaching Initiatives. If the diploma does not indicate the degree subject area, official transcripts must be provided to confirm MA or MS eligibility.



Teacher

## **Grant 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 N	chool Name:									
12-Digit I	2-Digit BEDS Code :									
Te	eacher(s) liste	ed below DO NO	T, in any ca	pacity, prov	ide non-secular ins	struction.				
Role	Last Name	First Name	Grade	Subject	Signature	Date				
Teacher										
Teacher										
Teacher										
Teacher										
Teacher										
Teacher										
Teacher										
Teacher										
Teacher										

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