



## **Fiscal Year (FY) 2025 Continuation Application Instructions**

*Scholarships for Opportunity and Results (SOAR) Act Grants*

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January 2025

Office of Federal Programs and Strategic Funding



# Enterprise Grants Management System

District of Columbia Office of the  
State Superintendent of Education



This website is best viewed using Current Versions of Google Chrome, Microsoft Edge, or Apple Safari

**LOGIN**

Username/Email

Password [Forgot Password](#)

**LOGIN**

[New User](#)

Select “**GMS Access / Select**”  
from the menu list



## Enterprise Grants Management System

District of Columbia Office of the  
State Superintendent of Education



You have been granted access to the forms below by your Security Administrator

**GMS Access / Select**

Assurances and Central Data

Phase I Assurances

Funding Applications

Other Data Collections

► **Monitoring**



Confirm filter year is set to “2025.” Search by name or scroll to locate your grant.



# Enterprise Grants Management System

District of Columbia Office of the State Superintendent of Education



Filters - Grant Type: All    Name:    Years: 2025     Only Show Available

**Central Data**

**Grant:** Central Data

**Grant Type:** Assurances and Central Data

**Application:** 2025 - Central Data - 00

**Revision:** Original Application

**SOAR Act Third Party Charter Support Organizations**

**Grant:** SOAR Act TPCSO

**Grant Type:** Competitive Grant

**Application:** 2025 - SOAR Act TPCSO - 00

**Revision:** Amendment 1



Confirm filter year is set to “2025.” Search by name or scroll to locate your grant.



## Enterprise Grants Management System

District of Columbia Office of the  
State Superintendent of Education



Filters - Grant Type: Continuation Grant Name: Years: 2025  Only Show Available

### SOAR Third Party Continuation Year 1

Grant: SOAR TP Continuation-Y1

Grant Type: Continuation Grant

Application: 2025 - SOAR TP Continuation-Y1 - 00

Revision: Original Application



## SOAR Teacher Pipeline Continuation Year 2

FY23 Award

**Grant:** SOAR Teacher Pipeline 2

**Grant Type:** Continuation Grant

Create an application for: 2025

Confirm the grant and grant type are accurate, then select “2025” to open and begin the application.

The application should open with a number of tabs available at the top of the screen.



**Use the tabs to navigate the grant application.**

- Avoid using the back arrow when navigating the application.
- Use the hyperlinked options at the top of the screen, when possible.

**Click “[SAVE PAGE](#)” at the bottom of application pages to save the content you enter.**

- Content will not save until all required fields are populated.
- Typing responses outside of EGMS in a location where they can be saved is sometimes helpful.

**Only submit the application when it is complete and ready for OSSE to review.**

## General Information

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### General Information

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This application is a continuation of a prior year SOAR (Scholarships for Opportunity and Results) Act grant. Detailed information about the requirements of this program can be found in the original application, the Request for Applications (RFA), and your signed performance agreement. OSSE will also issue a revised Grant Award Notification (GAN) with the amount carried over from the previous fiscal year.

Review general information about the grant.

No grantee information needs to be entered in this section.





# Contact Information

Enter contact information for your LEA grant staff.

Click **“SAVE PAGE”** when the information is complete.

Contact Information

\* Denotes required field

Application Approval / Disapproval Copy Email Addresses

Check to add up to five (5) email addresses to receive copies of automated approval/disapproval notices. Only the Head of School or Authorized Representative will receive an email notification and does not need to be included in this list. Any other users who should receive notification should be listed.

[ADD ADDITIONAL EMAIL ADDRESSES](#)

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Head of Organization:

Last Name\*  First Name\*

Position/Title\*

Address 1\*

Address 2

City\*  State\*  Zip+4\*

Phone\*  Extension  Fax

Email\*

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Grants Contact:

Last Name\*  First Name\*

Position/Title\*

Phone\*  Extension  Fax

Email\*

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Fiscal Contact

Last Name\*  First Name\*

Position/Title\*

Phone\*  Extension  Fax

Email\*

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Check a box below and complete the information if the Grants Contact is not the application contact.

SOAR Act Third Party Continuation Year 2 Application Contact:

[SAVE PAGE](#)

SOAR_Teacher_Pipeline_2	
<b>Current Year Funds</b>	
Allocation	\$13,500.00
ReAllocated (+)	\$0.00
Released (-)	\$0.00
<b>Total Current Year Funds</b>	<b>\$13,500.00</b>
<b>Prior Year(s) Funds</b>	
Rollover (+)	\$0.00
ReAllocated (+)	\$0.00
<b>Total Prior Year(s) Funds</b>	<b>\$0.00</b>
<b>Sub Total</b>	<b>\$13,500.00</b>
<b>Multi-District</b>	
Transfer In (+)	\$0.00
Transfer Out (-)	\$0.00
Administrative Agent	
<b>Adjusted Sub Total</b>	<b>\$13,500.00</b>

**Funds not applied for**  
 (Select the boxes below ONLY if the Organization is electing to release its Program funds back to OSSE to be reallocated to other Organizations.)

Current Year Funds	<input type="checkbox"/>
Prior Year Funds	<input type="checkbox"/>
<b>Total Available for Budgeting</b>	<b>\$13,500.00</b>

**CALCULATE TOTALS**

**SAVE PAGE**



# Funding Distribution

Review funding information.

If the details do not align to your expected funding amounts, please contact [OSSE](#) for support.

Application: 2024-2025 SOAR TP Continuation-Y2 - 00-SOAR TP Continuation-Y2  
Cycle: Original Application

2024-2025 10/1/2024 - 9/30/2025

- GENERAL INFORMATION
- CONTACT PAGE
- FUNDING DISTRIBUTION
- ALLOCATIONS
- BUDGET
- BUDGET AMENDMENTS
- SUPPORTING DOCUMENTATION
- ASSURANCES
- SUBMIT
- APPLICATION PRINT
- APPLICATION HISTORY

Allocations	
Current Year Funds	Prior Year Funds
13,500.00	0.00



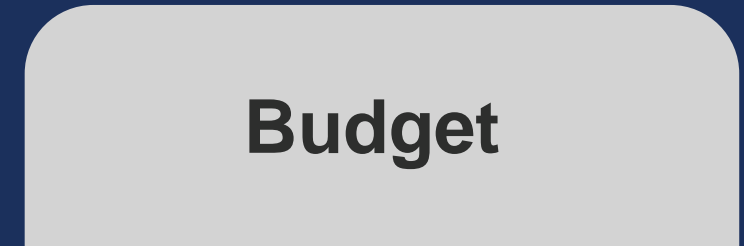
# Allocations

Review allocation information.

If the details do not align to your expected allocation amounts, please contact [OSSE](#) for support.

An additional set of tabs will appear when selecting the “Budget” tab.

Grantees will use this section to detail their expenditure plans.



Application: 2024-2025 SOAR TP Continuation-Y2 - 00-SOAR TP Continuation-Y2  
Cycle: Original Application

2024-2025 10/1/2024 - 9/30/2025

GENERAL INFORMATION	CONTACT PAGE	FUNDING DISTRIBUTION	ALLOCATIONS	BUDGET	BUDGET AMENDMENTS	SUPPORTING DOCUMENTATION	ASSURANCES	SUBMIT	APPLICATION PRINT	APPLICATION HISTORY
BUDGET OVERVIEW	SALARIES AND BENEFITS	PROFESSIONAL SERVICES	EQUIPMENT	SUPPLIES AND MATERIALS	OTHER OBJECTS	BUDGET SUMMARY				

### Budget Overview

For each of the following budget categories, the LEA must provide a full list of all planned expenditures.

A summary of the budget category planned expenditures can be found on the Budget Summary tab.





# Budget Detail Guidance

## Program Category

- Refer to the Expenditure Categorization Guide (linked at the top of each budget tab within the EGMS application) for more guidance

Definitions and Examples for Each Program Category and Budget Category							
<p>IMPORTANT NOTE: The examples in this table are provided only as a generic guide of the general scope of potential expenditures and have no relation to determinations of allowability for any particular federal grant program. Indeed, some entire categories may represent unallowable activities for some grant programs. Subgrantees should pay close attention to the <b>definitions</b> provided in column B in order to determine the appropriate categorization of expenditures.</p>							
		Budget Categories					
		Salaries and Benefits (100)	Contracted Professional Services (300)	Equipment (500)	Supplies and Materials (600)	Fixed Property Costs (700)	Other (800)
	<p><b>INSTRUCTION (10)</b></p> <p>The direct instructional interaction between teachers and students. This instruction may be provided to students in a school classroom, in an alternate location (i.e.: home or hospital), or in other learning situations, including those involving co-curricular activities. The activities of teacher aides or classroom assistants of any type (i.e.: clerks, graders, teaching machines) who assist in the instructional process are also in this category.</p>	Teachers, Tutors, Coaches, Substitute Teachers, Teacher's Aides, Reading Specialists, Classroom Paraprofessionals (all positions are on staff)	Contracted Teachers / Instructors or Substitute Teachers (those that are not an official employee)	Machinery, Furniture, Fixtures, Technology-related Hardware more than \$10,000 per unit (according to OSSE's equipment policy)	General Supplies, Textbooks, Instructional Aids, Instructional Software, Internet Fees - Site License	Rental of Instruction Equipment	Dues and Fees, Reimbursement of Tuition, Teacher Aide Education, Approved Conference/Training Fees
	<p><b>SUPPORT SERVICES (20)</b></p> <p>The technical and logistical support to facilitate and enhance instruction. These are services within programs that aid in fulfilling that program's instructional objectives or community service goals, rather than being full-service entities. Such services include activities or stipends associated with providing professional development to the instructional staff, assessing and improving the well-being of students, and supplementing the teaching process.</p>	Site Coordinators, Instructional Staff Trainers, Librarians, Counselors, Audiovisual Services, Curriculum Consultants, Program Evaluators, Psychologists, Social Workers, Nurses, Attendance Personnel, Record Clerks, Chief Academic Officer, Dean of Students (all positions are on staff)	Contracted Consultants, Contracted Evaluators, Counselors, Therapists, Doctors or Instructional Staff Trainers. Fees for Professional Development, In-service Training, or Conference	Machinery, Furniture, Fixtures, Technology-related Hardware more than \$10,000 per unit (according to OSSE's equipment policy)	General Supplies, Books, Library Books, Periodicals, Testing Materials	Rental of Support Services Equipment	Dues and Fees, Reimbursement of Tuition, Teacher Aide Education, Approved Conference/Training Fees,
	<p><b>ADMINISTRATIVE COSTS (30)</b></p> <p>The activities concerned with handling the overall administrative</p>	Program Directors, Project Directors, Office/Administrative assistants, Clerks, Researchers, Public Relations, Purchasers	Contracted Auditors, Lawyers, Accountants, Admin Staff	Machinery, Furniture, Fixtures, Technology-related Hardware more than \$10,000 per unit	General Supplies,	Rental of Administrative	Approved Conference/Trainin

# Budget Detail Guidance, continued

## Position Title (Salaries and Benefits only)

- Position title of the employee **working on the grant project**
- If multiple individuals with the same title will be included in the budget, you may **include them on the same line** (e.g., “2 Special Education Teachers”)

## Brief Position Description (Salaries and Benefits only)

- Brief description (**no more than 1-2 sentences**) of the role of this employee
- Demonstrate how the activities conducted by the individual are **necessary** to meet the purpose or objectives of the grant project

# Budget Detail Guidance, continued

## Item(s) to be Purchased (All other budget tabs)

- Description of the specific goods or services that will be purchased with grant funds

## Purpose of Expenditure (All other budget tabs)

- Brief description (**no more than 1-2 sentences**) of the purpose of this expenditure in the grant program
- Explain **why the expenditure is necessary** to meet the purpose or objectives of the grant project



# Budget Detail Guidance, continued

## Cost Basis

- **Justify the amount budgeted** for the expenditure
- Demonstrate how the amount budgeted is reasonable
- **SALARIES:** include the annual salary, fringe benefits rate (if applicable), percentage of staff time that will be requested for reimbursement, number of staff in the position (if more than one), and time period for reimbursement (if not the entire award period).
  - **GOODS:** include the quantity (i.e., number of units), and estimated cost per unit
  - **SERVICES:** include the time period of the contract
  - **EXAMPLE:** *Annual salary and benefits for this full-time position is \$115,000. 100% will be charged to the grant in reimbursement requests from 8/1/25 - 6/30/26.*

# Budget

## BUDGET SUMMARY

Review the summary of the expenditures entered and saved in this application.

If the summary is not accurate, adjust expenditures in previous tabs.

Remove blank rows from display:  Yes  No

Code	Activity Description	100 - Salaries and Benefits	300 - Professional Services	400 - Property Services	500 - Equipment	600 - Supplies and Materials	700 - Fixed Property Costs	800 - Other Objects	TOTAL
30	Administration	5,550.00				2,750.00			8,300.00 72.17 %
110	Hard Costs		3,200.00						3,200.00 27.83 %
Subtotal		5,550.00 48.26 %	3,200.00 27.83 %			2,750.00 23.91 %			11,500.00 100.00 %
Total Budget									11,500.00

# Budget Amendments

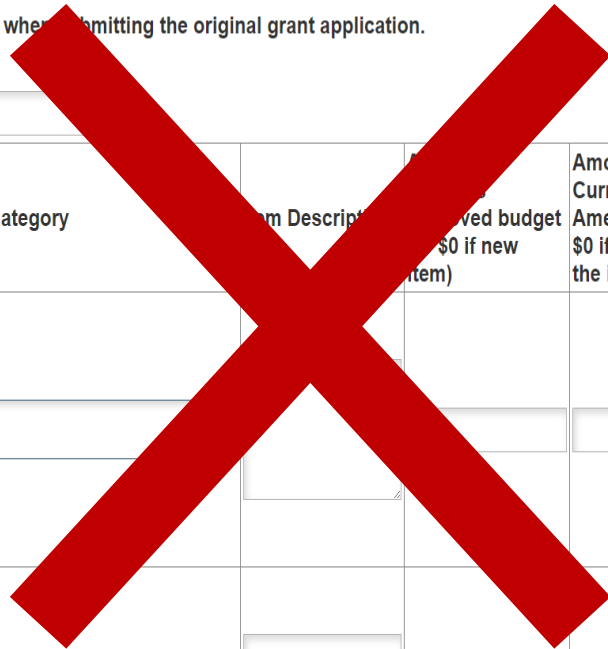
## Budget Amendments

Instructions: Please complete the following table with each budget amendment submission. The corresponding changes should also be made in the budget tab prior to submitting the amendment.

Note: This tab should not be completed when submitting the original grant application.

Enter today's date (MM/DD/YYYY)

Budget Category	Program Category	Item Description	Amount in Current Amendment (or \$0 if new item)	Amount in Current Amendment (or \$0 if removing the item)	Rationale for the change to this budget item
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



**Leave this tab blank.** This tab may be used for budget amendment requests at a later date.

Please note: you may make budgetary changes as needed in this continuation application.

## Supporting Documentation

Any supporting documentation should be uploaded using the File Upload process below. Required documentation can be submitted upon the initial submission of this application and when amending the application. If the Office of State Superintendent of Education (OSSE) requests further documentation, this File Upload process is the location where such files should be attached to your application for review.

If you have files to upload for OSSE review, please provide a brief description of the contents of each file. If you upload a file in error, those files cannot be removed. Please detail any directions about such files to OSSE below.

(0 of 2000 maximum characters used)

Please upload supporting information files. Allowable file types include Microsoft Word (.doc/.docx), Excel (.xls/.xlsx) and Adobe PDF. Files must be less than 6MB in size and the file name should not include special characters (i.e. #, \$, % etc.). Attempting to upload a file that does not comply with these restrictions will result in an error and loss of unsaved data.

If any documents that were previously uploaded should be removed, please note that instruction in the textbox above where you have provided a description of your files.

Uploaded Files:

No files are currently uploaded for this page.

SAVE PAGE

# Supporting Documentation

**Leave this tab blank.** This tab may be used to provide supplemental information or documents with future amendments, if needed.

An additional set of tabs will appear when selecting the “**Assurances**” tab.

# Assurances

PROGRAM SPECIFIC ASSURANCES	<b>ASSURANCES AGREEMENT SUMMARY</b>
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**Program Specific Assurances**

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By checking this box and saving the page, the applicant hereby certifies that he/she has read, understood and will comply with the assurances listed below.

**Applicants will be required to attest to the following program specific assurances:**

As the duly authorized representative of the applicant I certify that:

1. Will comply with activities necessary to carry out a mandated evaluation of the Opportunity Scholarship Program (OSP), as specified in Section 3011(a)(1) of the SOAR Act.
2. Will comply with the Davis-Bacon and Related Acts (40 U.S.C. 3141 et seq), as applicable.



## Assurances

The authorized representative of the applicant certifies that he or she has read, understood and will comply with all of the provisions of the following assurances.

NOTE: These checkboxes will be automatically filled in as each of the separate certifications/assurances are read and agreed to.

5/30/2024

This is the date on which your LEA or organization agreed to the Common Assurances in the Central Data Application in EGMS. IF THIS FIELD IS BLANK, YOUR APPLICATION WILL NOT BE ACCEPTED. You must go to the Central Data Application to complete this required step.

Program Specific Assurances

The required assurances (both the Common Assurances in the Central Data Application and the Program Specific Assurances in this application) were fully agreed to on this date:

LEGAL ENTITY AGREES

Once this page is signed by the authorized representative, the “**Program Specific Assurances**” box will be checked and a date will appear in the gray box at the bottom of the page.



# Assurances

## ASSURANCES AGREEMENT SUMMARY

The assurance agreement summary must be completed by the LEA's **authorized representative**. They may select “**LEGAL ENTITY AGREES**” to complete this page.

If you need to make adjustments to who has this role, please contact [OSSE](#) for support.

Submit

The Consistency Check must be successfully processed before you can submit your application.

CONSISTENCY CHECK

LOCK APPLICATION

UNLOCK APPLICATION

Assurances  
LEA Data Entry  
LEA Administrator  
Program Review  
Final Review

1/13/2025

Select “**CONSISTENCY CHECK**” and allow the program to confirm that the application is ready for submission.

If an error appears, complete the missing information and repeat the consistency check.



Tester OCIO ran the consistency check process which locked the application on 1/13/2025 at 4:46 PM.

LOCK APPLICATION

UNLOCK APPLICATION

Assurances 1/13/2025  
Consistency Check was run on: 1/13/2025  
LEA Data Entry  
LEA Administrator  
Program Review  
Final Review

SUBMIT TO OSSE

The application has been submitted for review.

CONSISTENCY CHECK

LOCK APPLICATION

UNLOCK APPLICATION

Assurances 1/13/2025  
Substantially Approvable Date: 1/13/2025  
Consistency Check was run on: 1/13/2025  
LEA Data Entry  
LEA Administrator submitted the application to OSSE on: 1/13/2025  
Program Review  
Final Review



Submit

When the check is complete and accurate, a “**SUBMIT TO OSSE**” button will appear. Select that button to submit the application.

Once the application has been submitted, red text confirming the submission will appear.



# Application Print

Printing notes are included in this tab. Please review them carefully to understand the timing of this process.

Printing and/or saving your application is optional.

Requested prints will be processed every hour, starting at 6:01AM and ending at 9:01PM, every day of the week. Requests entered before the next print run will be included when that upcoming run is executed (Example: A print requested at 2:48 PM will be processed with the run at 3:01 PM. Another request submitted at 3:02 PM will not be processed until the next run at 4:01 PM). Once completed, a link to a PDF will display on the right side of the page under "Completed Printed Jobs." Applicants may save this PDF to their local computer and print as desired.

Please click the "Request Print" button only once. Each press of the button will send an additional request to the system.

Completed print request links will remain on this page for 7 days. After that time, the document will be removed. If you would like to retain a copy beyond 7 days, please save the PDF to your local computer.

## Request Print Job

SOAR Third Party Continuation Year 2

**REQUEST PRINT**

Requested Print Jobs

Completed Print Jobs



# Application History

## Application History (Read Only)

Status Change	User Id	Action Date
Final Application Review	FReviewer OCIO (FReviewer)	01-13-2025 10:15 AM
Pre-Approved	IReviewer OCIO (IReviewer)	01-13-2025 10:13 AM
Submitted to OSSE	Tester OCIO (OCIO Tester)	01-13-2025 10:06 AM
Consistency Check	Tester OCIO (OCIO Tester)	01-13-2025 10:06 AM
Returned for Changes	IReviewer OCIO (IReviewer)	01-13-2025 10:03 AM
Submitted to OSSE	Tester OCIO (OCIO Tester)	01-13-2025 9:28 AM

This tab can be used to confirm submission, review the status of your application, and see the details of the application history.



# Questions?

If you need support, please contact your SOAR grant manager.

SOAR Grant Name	SOAR Grant Manager	Email
SOAR Teacher Pipeline, SOAR Third Party	Cynthia Davis	<a href="mailto:Cynthia.Davis@dc.gov">Cynthia.Davis@dc.gov</a>
SOAR Facilities	Marie Hutchins	<a href="mailto:Marie.Hutchins@dc.gov">Marie.Hutchins@dc.gov</a>

# Thank You!