

# FY 2025 Small, Rural School Achievement (SRSA) Application

Please read all below instructions.

**Welcome to the fiscal year (FY) 2025 Small, Rural School Achievement (SRSA) grant application.**

**On average, the SRSA application takes 10-30 minutes to complete.**

**Complete the application by May 16, 2025.**

**The SRSA application contains the following sections:**

- Local Educational Agency (LEA) Information:
  - LEA Name and Address
  - Authorized Representative
  - Secondary Contact
  - Unique Entity Identification (UEI) number
- General Education Provisions Act (GEPA) Statement
- Intended Use(s) of Funds
- Assurances
- Certification and Signature
- Application Review
- Application Submission

**You may begin the application by clicking the "Next" button at the bottom of this screen.** Once you have started, you may select **"Resume Later"** to save your progress. You may then re-access your application using the same link from the invitation email you received. Similarly, if your session times out, please return to the invitation email and re-click the application link to continue your work. If you have any questions about this application, or require additional support, please contact the REAP team directly by emailing [reap@ed.gov](mailto:reap@ed.gov).

After submitting the application, you will see a confirmation page that includes a **link to our Post-Application Information Document**. Immediately after your LEA submits the application, **the Authorized Representative who received the invitation email will receive a confirmation email**. This email will come from [no-reply.survey@connect.gov](mailto:no-reply.survey@connect.gov) and cannot be resent. The FY 2025 SRSA Post-Application Information Document contains important next steps, helpful resources, and frequently asked questions. Since this resource is available as a PDF, we highly recommend saving a copy for your LEA's records and sharing with any additional staff members who may benefit from the information. While the confirmation email is only sent to the Authorized Representative, important information about the application process and SRSA grant administration can be found on the REAP website.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a currently valid OMB control number. The valid OMB control number for this collection is 1810-0646. Public reporting burden for this collection of information is estimated to average 30-minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to receive awards authorized under the Elementary and Secondary Education Act of 1965, sections 5211-5212 and 5221.

If you have comments concerning the accuracy of the time estimate, suggestions for improving this individual collection, or if you have comments or concerns regarding the status of your individual submission of this application, please contact the REAP team directly at [reap@ed.gov](mailto:reap@ed.gov) or (202) 401-0039.

There are 15 questions in this survey.

## LEA Information

Confirm you are applying for the SRSA grant for the correct local educational agency (LEA) by reviewing the information below. If the information is correct, confirm by selecting "Yes." If the information is not correct, select "No" and a space will be provided for you to update the information. As a reminder, if you are the fiscal agent for more than one SRSA-eligible LEA, a separate application must be submitted for each LEA.

The LEA name, current mailing address, and phone number are listed below.

{TOKEN:ATTRIBUTE\_1}

{TOKEN:ATTRIBUTE\_2}

{TOKEN:ATTRIBUTE\_3}, {TOKEN:ATTRIBUTE\_4} {TOKEN:ATTRIBUTE\_5}

{TOKEN:ATTRIBUTE\_6}

If this information is correct, select "Yes" below. If not, select "No" and update the information in the space provided.

\*

Choose one of the following answers

Please choose **only one** of the following:

☐

Yes, the LEA contact information is correct.

☐

No, the LEA contact information is not correct.

If your answer to the above question is "No," provide only the corrected LEA information below:

Only answer this question if the following conditions are met:

Answer was 'No, the LEA contact information is not correct.' at question ' [QA010]' (The LEA name, current mailing address, and phone number are listed below. {TOKEN:ATTRIBUTE\_1} {TOKEN:ATTRIBUTE\_2} {TOKEN:ATTRIBUTE\_3}, {TOKEN:ATTRIBUTE\_4} {TOKEN:ATTRIBUTE\_5} {TOKEN:ATTRIBUTE\_6} If this information is correct, select "Yes" below. If not, select "No" and update the information in the space provided. )

Please fill in at least one answer

Please write your answer(s) here:

LEA Name:

LEA Address:

LEA City:

LEA State:

LEA Zip:

LEA Phone Number:

The Authorized Representative is the primary person representing the LEA to the Department. Should funds be awarded, their name will be listed on the Grant Award Notification (GAN). This person is the primary point of contact for the REAP team and will receive communications from G5, the Department's grants management platform. The Authorized Representative must be different than the secondary contact. Your LEA's Authorized Representative information appears below:

{TOKEN:FIRSTNAME} {TOKEN:LASTNAME}  
{TOKEN:EMAIL}

If this information is correct, select "Yes" below. If not, select "No" and update the information in the space provided.

\*

Choose one of the following answers

Please choose **only one** of the following:

- ☐ Yes, the Authorized Representative information is correct.
- ☐ No, the Authorized Representative information is not correct.

If your answer to the above question is "No," provide only the corrected Authorized Representative information below:

Only answer this question if the following conditions are met:

Answer was 'No, the Authorized Representative information is not correct.' at question ' [QA030]' (The Authorized Representative is the primary person representing the LEA to the Department. Should funds be awarded, their name will be listed on the Grant Award Notification (GAN). This person is the primary point of contact for the REAP team and will receive communications from G5, the Department's grants management platform. The Authorized Representative must be different than the secondary contact. Your LEA's Authorized Representative information appears below: {TOKEN:FIRSTNAME} {TOKEN:LASTNAME} {TOKEN:EMAIL} If this information is correct, select "Yes" below. If not, select "No" and update the information in the space provided. )

Please fill in at least one answer

Please write your answer(s) here:

Authorized Representative First Name:

Authorized Representative Last Name:

Authorized Representative Email:

The secondary contact will be listed on the SRSA GAN and will receive communication from the REAP team and G5, however they are **not** the primary point of contact for the LEA. The secondary contact must be different than the Authorized Representative. Your LEA's secondary contact information appears as follows:

{TOKEN:ATTRIBUTE\_14} {TOKEN:ATTRIBUTE\_15}  
{TOKEN:ATTRIBUTE\_16}

If this information is correct, select "Yes" below. If not, select "No" and update the information in the space provided.  
\*

Choose one of the following answers

Please choose **only one** of the following:

- ☐ Yes, the secondary contact information is correct.
- ☐ No, the secondary contact information is not correct.

If your answer to the above question is "No," provide only the corrected secondary contact information below:

Only answer this question if the following conditions are met:

Answer was 'No, the secondary contact information is not correct.' at question ' [QA050]' (The secondary contact will be listed on the SRSA GAN and will receive communication from the REAP team and G5, however they are not the primary point of contact for the LEA. The secondary contact must be different than the Authorized Representative. Your LEA's secondary contact information appears as follows: {TOKEN:ATTRIBUTE\_14} {TOKEN:ATTRIBUTE\_15} {TOKEN:ATTRIBUTE\_16} If this information is correct, select "Yes" below. If not, select "No" and update the information in the space provided. )

Please fill in at least one answer

Please write your answer(s) here:

Secondary Contact First Name:

Secondary Contact Last Name:

Secondary Contact Email:

### Unique Entity Identifier:

An LEA must have a UEI with an active registration status in SAM to access its awarded SRSA funds. An LEA without a UEI may not receive an SRSA award until it has obtained and registered a UEI. The Department has pre-populated the UEI below for any LEA currently registered in the System for Award Management (SAM) if the REAP team had a prior record of your LEA's UEI. If your LEA's UEI is not pre-populated, please enter the UEI provided to the LEA by SAM.

### Review the UEI field below and proceed with one of the following steps:

- If the UEI provided in the field below is correct, you may proceed to the next section of the application by selecting "Next" at the bottom of the page.
- If the UEI provided in the field below is not correct, update the field so that it displays the correct UEI for your LEA, then select "Next" at the bottom of the page.
- If the field below is blank, the Department does not have a UEI on file for your LEA. If your LEA has a UEI registered in SAM.gov, type it into the field below. If your LEA does not have a UEI at this time, please select "Resume Later" to pause your work on the application. You must visit SAM.gov to request a new UEI free of charge, then resume the application once you have a UEI available to provide.

\*

Please write your answer here:

**NOTE:** Our records show that your UEI registration's expiration date in SAM.gov is {TOKEN:ATTRIBUTE\_9}.

## GEPA Statement

Section 427 of the General Education Provisions Act (GEPA) requires Department grantees, such as SRSA grantees, to describe the steps the grantee will take to ensure equitable access to, and participation in, the Federally-assisted program by addressing the special needs of students, teachers, and other program beneficiaries. The statute highlights six types of barriers to equitable participation, including barriers based on gender, race, national origin, color, disability, or age.

Submit your LEA's FY 2025 GEPA statement by typing or pasting it into the response box below. An example GEPA statement is displayed in the response box. Review the example statement and revise as needed to ensure it is accurate for your LEA.

\*

Please write your answer here:

**NOTE:** The maximum character limit is 1000.

## Intended Use(s) of Funds

An LEA may use SRSA funds to pay for activities that are allowable under Title I, Part A; Title II, Part A; Title III; Title IV, Part A; and Title IV, Part B of the Elementary and Secondary Education Act of 1965. SRSA funds must be used to supplement, and not supplant, any other Federal, State, or local education funds. All uses of SRSA funds must be reasonable and necessary and comply with all requirements in the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), 2 CFR Part 200.

Using the checkboxes below, please indicate how your LEA intends to use any awarded FY 2025 SRSA funds. Some intended activities may fit under multiple categories. In these cases, the REAP team encourages you to select the category that aligns with the primary goal or outcome of the proposed activity. If you intend to use your funds in multiple ways, you may select multiple boxes. The categories listed below represent the most common uses of SRSA funds; however, the list is not exhaustive, and we recognize these categories do not encompass all possible uses of funds.

**IMPORTANT NOTE:** This information is being collected for data purposes only. Your response to this question is not a binding commitment to spend SRSA funds in a certain way and you may use your awarded funds for any allowable purpose. Additionally, the approval of your application is

not an approval or disapproval of your intended use of funds. Because your response is non-binding, **you will not receive confirmation of your selections for this question**. If you wish to retain this information, you will need to make note of it now.

If you have questions about your intended use(s) of SRSA funds, please email [reap@ed.gov](mailto:reap@ed.gov) and the REAP team will be happy to advise you on this section of the application.

Please select all of your LEA's intended use(s) of FY 2025 SRSA grant funds from the list below.

\*

Select all that apply

Please choose **all** that apply:

- ☐ College and Career Readiness or Career and Technical Education (e.g. increased access to advanced dual-enrollment or advanced coursework like AP or IB)
- ☐ Data (e.g. Equipment, materials, and training needed to compile and analyze student achievement data.)
- ☐ Early Childhood or Pre-K Activities
- ☐ Activities Allowable under Title III (e.g., English language acquisition activities)
- ☐ Family or Parental Involvement Activities
- ☐ Improving Academic Achievement
- ☐ Instructional Materials (NOT Technology)
- ☐ Library Materials, Staff, and Activities
- ☐ Professional Development
- ☐ Reducing Class Size
- ☐ Safe and Healthy Student Activities (e.g. school climate interventions or increased access to student counseling services)
- ☐ Staff Compensation
- ☐ Out of school time programming (e.g. afterschool or summer programming)
- ☐ Technology – Devices
- ☐ Technology – Not Devices

**You may select any number of choices that best align with your intended use of funds.**

## Assurances and Signature

**As the duly Authorized Representative of the LEA applying for this grant, I certify that the applicant:**

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial, and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management, and completion of the project to be funded with SRSA funds.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any Authorized Representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply, as applicable, with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and §§7324-7328), which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to:
  - (a) Title VI of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, color or national origin;
  - (b) Title IX of the Education Amendments of 1972, as amended, which prohibits discrimination on the basis of sex;
  - (c) Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination on the basis of having a disability;
  - (d) the Age Discrimination Act of 1975, as amended, which prohibits discrimination on the basis of age;

- (e) the Drug Abuse Office and Treatment Act of 1972, as amended, relating to nondiscrimination on the basis of drug abuse;
- (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970, as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism;
- (g) §§523 and 527 of the Public Health Service Act of 1912, as amended, relating to confidentiality of alcohol and drug abuse patient records;
- (h) Title VIII of the Civil Rights Act of 1968, as amended, relating to nondiscrimination in the sale, rental or financing of housing;
- (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and
- (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

The applicant, through its Authorized Representative, agrees to the required assurances above.

\*

Select all that apply

Please choose **all** that apply:

☐ Agree

By submitting this application, I certify that the statements herein are true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.

\*

Select all that apply

Please choose **all** that apply:

☐ Agree

Enter today's date:

\*

Please enter a date:

Type the LEA Authorized Representative's signature below:

\*

Please write your answer here:

## Review Your Application

Review the summary of your application responses below. Use the **"Previous"** button to go back and make changes. If you do not need to change any of your LEA's application responses, click **"Next"** at the bottom of this page to proceed to the final section of the FY 2025 SRSA grant application.

## Summary of Application Responses:

<u>Application Questions:</u>		<u>LEA Responses:</u>
1.	Is the LEA name, mailing address, and phone number correct as listed?	{INSERTANS:892369X2949X35645}
a.	If not, provide the corrected LEA name here:	{INSERTANS:892369X2949X35650SQ001}
b.	If not, provide the corrected LEA address here:	{INSERTANS:892369X2949X35650SQ002}
c.	If not, provide the corrected LEA city here:	{INSERTANS:892369X2949X35650SQ003}
d.	If not, provide the corrected LEA state here:	{INSERTANS:892369X2949X35650SQ004}
e.	If not, provide the corrected LEA zip code here:	{INSERTANS:892369X2949X35650SQ005}
f.	If not, provide the corrected LEA phone number here:	{INSERTANS:892369X2949X35650SQ006}
2.	Is the LEA Authorized Representative name and email correct?	{INSERTANS:892369X2949X35649}
a.	If not, provide the corrected Authorized Representative first name here:	{INSERTANS:892369X2949X35656SQ001}
b.	If not, provide the corrected Authorized Representative last name here:	{INSERTANS:892369X2949X35656SQ002}
c.	If not, provide the corrected Authorized Representative email here:	{INSERTANS:892369X2949X35656SQ003}
3.	Is the LEA secondary contact name and email correct?	{INSERTANS:892369X2949X35651}
a.	If not, provide the corrected secondary contact first name here:	{INSERTANS:892369X2949X35657SQ001}
b.	If not, provide the corrected secondary contact last name here:	{INSERTANS:892369X2949X35657SQ002}
c.	If not, provide the corrected secondary contact email here:	{INSERTANS:892369X2949X35657SQ003}
4.	Provide the LEA's UEI here:	{INSERTANS:892369X2949X35646}
5.	LEA's FY2025 GEPA Statement:	{INSERTANS:892369X2951X35659}
6.	Intended Use of Funds	Responses to this question are not provided in this LEA's intended use of funds described on the FY2025 SRSA application. The response is non-binding and for data reporting purposes only. Your LEA may change the funds at any point during the grant performance period by notifying the REAP team of the change as long as it is for allowable activities. If you wish to retain your response, please use the back button to return to the question and take note of your response.
7.	Date of Application:	{INSERTANS:892369X2950X35655}
8.	Authorized Representative's Signature:	{INSERTANS:892369X2950X35654}

## Submit Your Application

**After reading all of the instructions on this page, you may click "Submit" at the bottom to complete the FY 2025 SRSA grant application for your LEA.**

After your LEA submits the application using the button below, the Authorized Representative who received the invitation email will receive a confirmation email. **This email will come from no-reply.survey@connect.gov and cannot be resent.** It is possible that your LEA's security or



firewall settings may route this email to a spam or junk folder to prevent it from being delivered at all. In these cases, REAP recommends working with your LEA's technology support staff to retrieve the email.

While the confirmation email is only sent to the Authorized Representative, important information about the application process and SRSA grant administration can be found on the REAP website. The next page of the application contains a link to the **FY 2025 SRSA Post-Application Information Document**, which contains important next steps, helpful resources, and frequently asked questions. Since the resource is available as a PDF, we highly recommend saving a copy for your LEA's records and sharing it with any additional staff members who may benefit from the information.

\*

Choose one of the following answers

Please choose **only one** of the following:

☐ I have read the above information and understand how to keep a copy of my application and find resources.

**Thank you for submitting your FY 2025 SRSA Application. You have successfully submitted your application.**

**Please click the link below to review important next steps, helpful resources, and frequently asked questions. Since this resource is available as a PDF, we highly recommend saving a copy for your LEA's records and sharing it with any additional staff members who may benefit from the information.**

{TOKEN:ATTRIBUTE\_13}

03/26/2025 – 13:13

Submit your survey.

Thank you for completing this survey.