**Consortium Guidelines**

Postsecondary institution must meet a minimum allocation of $50,000 to qualify for Perkins funding. If an institution is unable to meet these requirements, it may form a consortium between multiple institutions to meet the qualifications.

**Instructions/Additional Resources:**

The following policy applies to postsecondary institutions with annual allocations of less than $50,000, thereby subject to distribution of funds by consortium agreement.

Strengthening Career and Technical Education For the 21st Century Act

Sec. 132(3)

1. In General. - In order for a consortium of eligible institutions described in paragraph (2) to receive assistance pursuant to such paragraph, such consortium shall operate joint projects that –
2. Provide services to all postsecondary institutions participating in the consortium; and
3. Are of sufficient size, scope, and quality to be effective.

1. Funds to Consortium. – Funds allocated to a consortium formed to meet the requirements of this section shall be used for purposes and programs that are mutually beneficial to all members of the consortium and shall be used only for programs authorized under this title. Such funds may not be reallocated to individual members of the consortium for purposes or programs benefitting only one member of the consortium.

Consortium postsecondary eligible recipients must meet the requirements of Sec. 132 for the development, implementation and delivery of Perkins funding. Grantees unable to meet the requirements of the law may be subject to non-compliance actions taken by the state.

**How Does the Consortium Work?**

1. Consortium applications should be developed with **goals and objectives mutually beneficial to all partners**.
   1. Joint projects and professional development activities are encouraged whenever possible.
   2. Partners will work together to develop and submit the Perkins Consortium Agreement and the Program Improvement Grant application to submit to KBOR.

* 1. Partners should meet periodically throughout the year to jointly plan, disseminate information, develop strategies, and evaluate continuous improvement practices.

1. The combined consortium partner annual Perkins allocations will be transferred to the lead partner that will oversee programs and purposes benefitting all consortium members.
   1. The lead partner will be responsible for submitting all progress reports, final report and revisions to KBOR in addition to being the lead contact for KBOR inquiries.

Perkins Consortium Agreement FY20 (2019-2020)

[Insert Consortium Name here]

**Complete the following:**

|  |  |
| --- | --- |
| **Postsecondary Institution (Fiscal Agent)**  **Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_FAX:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Postsecondary Institution**  **Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_FAX:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

\*Add boxes for consortium members as needed

Consortium Plan Narrative

The consortium plan narrative describes how your consortium proposes to improve career technical education and address the required and permissible activities under the Perkins Act. Respond to each of the following questions.

1. How does your plan support the career technical education programs in your consortium? What initiatives included in your plan support new or significantly improved CTE programming? Describe how you have selected the programs that will receive support and how the consortium, as a whole, will benefit from the Perkins expenditures.
2. Describe the process you used to analyze and interpret performance on core indicators, and how the expenditure of funds in your plan support improved performance on negotiated performance targets.
3. Describe the consortium’s plan for providing sustained, high-quality professional development and how this plan is supported by expenditure decisions.
4. If you are purchasing equipment for the consortium with Perkins funds, how will the equipment benefit all consortium members?

**Statement of Assurances and Certifications**

We, as eligible recipients for funds under the S*trengthening Career and Technical Education for the 21st Century Act* *(Perkins V),* hereby grant the following assurances:

* *Applicants submitting an application to the Kansas Board of Regents, certify they have read all application documents including any revised documents and agree to comply with all applicable federal requirements as outlined in the Strengthening Career and Technical Education for the 21st Century Act, subsequent federal requirements, state requirements, local laws, ordinances, rules and regulations, public policies herein and all others applicable*
* *To administer each program, service or activity covered in this application in accordance with all applicable statutes and regulations governing the Strengthening Career and Technical Education for the 21st Century Act*
* *No funds expended under the Act will be used to acquire equipment (including computer software) in any instance in which such acquisition results in a direct financial benefit to any organization representing the interests of the acquiring entity or the employees of the acquiring entity, or any affiliate of such an organization.*
* *Certifies by its representative’s signature hereon that neither it nor vendors used in expenditures with Carl D. Perkins grant funds are presently debarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from participation in this Agreement by any federal or state department or agency.*
* *To comply with all reporting requirements in a timely manner and that the information reported is valid, reliable and accurate.*
* *The determinations regarding the distribution of these grant funds are an agency action by the Kansas Board of Regents, an agency of the State of Kansas. In accordance with K.S.A. 77-601 et seq., The Kansas Board of Regents is hereby providing final notice that, with respect to the distribution of these funds, the board has taken final agency action. The distribution amount approved by the Board is set forth in this award notice.*
* *General Counsel Julene L. Miller is the agency officer who shall receive service on behalf of the Kansas Board of Regents of any subsequent petition for judicial review of this action.  Any such petition for judicial review must be filed within 30 days of the date of this document.*
* *To be in compliance with Executive Order 12246; Title VI of the Civil rights Act of 1964, as amended; Title IX Regulations; Section 504 of the Rehabilitation Act of 1973, as amended; Individuals with Disabilities Education Act and any other federal or state laws, regulations and policies which apply to the operation of the programs.*

We will not discriminate on the basis of sex, race, color, national origin or disability in the educational programs, services or activities being provided.

I/we hereby certify that the information provided in this local agreement is true and correct to the best of my/our knowledge, information, and belief, and that the required assurances are given. All approved programs, services, and activities shall be conducted in accordance with state and federal laws, rules and regulations; and in accordance with the Kansas Board of Regents policies and program standards.

**SIGNATURES OF ALL CONSORTIUM MEMBERS ARE REQUIRED**

**Consortium Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Perkins Eligible Institution (Fiscal Agent)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**President (print)**

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**Institution President Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Perkins Coordinator/Authorized Institution Representative Signature Date**

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**Joint Institution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**President (print)**

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**Institution President Signature Date**

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**Perkins Coordinator/Authorized Institution Representative Signature Date**

*[Duplicate as needed]*