**External Organization Profile**



**EXTERNAL ORGANIZATION PROFILE**

**DIRECTIONS**

The North Carolina Department of Public Instruction (NCDPI) is required under Section 4203(a)(11) of the Every Student Succeeds Act (ESSA), Title IV, Part B, 21st Century Community Learning Centers (21st CCLC), to prescreen external organization that could provide assistance with the implementation of 21st CCLC programs and make a list of prescreened external organizations available to the entities participating in the 21st CCLC program. The term “external organization” is defined under Section 4201(b)(4) of the ESSA as a nonprofit organization with a record of success in running or working with before and after school (or summer recess) programs and activities; or in the case of a community where there is no such organization, a nonprofit organization in the community that enters into a written agreement or partnership with an organization with a record of success to receive mentoring and guidance in running or working with before and after school (or summer recess) programs and activities.

In order to meet the criteria for the minimum “record of success” needed to qualify, each organization completing the profile must verify it has accomplished all of the following:

1. Operates as a nonprofit in good standing in North Carolina;
2. Is not currently on the suspension or debarment list for the State or Federal government (federal list, <https://www.sam.gov>; NC list: <http://www.doa.state.nc.us/PandC/actions.asp>); and
3. Had a minimum of five years of experience operating or delivering services to out-of-school time programs in North Carolina.

If an organization meets all of the requirements above, it is eligible to complete the External Organization Profile (EOP).

To be considered for inclusion on the 2017-2018 list of prescreened providers, the completed EOP must be received by the Federal Program and Support Division at the NCDPI **by 5:00 p.m. (EDT) on Friday, June 30, 2017.** No EOPs submitted to the NCDPI past the deadline will be considered. E-mailed applications will not be accepted. Applicants are responsible for sending application packages utilizing a delivery service (US Postal Service, UPS, FedEx, etc.) that offers a tracking/delivery confirmation. Completed applications must be submitted by mail to the following address:

North Carolina Department of Public Instruction

Attention: Sylvia Moore

Federal Program Monitoring and Support

6350 Mail Service Center

Raleigh, North Carolina 27699-6350

**\***NOTE: Where solicited, all authorized signatures must be scripted by hand; electronic signatures will not be accepted.

**DISCLAIMERS**

* Any external organization that meets and maintains the criteria outlined above, completes all sections in the survey, and submits by the deadline, will be included on the Prescreened External Organizations list for at least a two-year period. The list will be maintained on the NCDPI website for the 21st CCLC Program, located at <http://www.ncpublicschools.org/21cclc/resources/>.
* No funding is directly associated with completion of this profile nor for inclusion on the Prescreened External Organizations list.
* Completion of this profile or inclusion on the Prescreened External Organizations list **will not result in a contract with NCDPI.**
* The NCDPI's inclusion of an organization on the eligible provider list **is not an endorsement of the organization, nor is it a certification of the quality of activities provided by the organizations**. Inclusion on the list is solely verification that the organization has successfully completed the external organization prescreening process.
* The NCDPI reserves the right to omit any organization from the list for failure to complete the profile in its entirety.
* The NCDPI reserves the right to remove an organization from the list when it fails to meet the minimum record of success.
* The NCDPI does not guarantee the number of referrals or contracts, if any, which may result for any organizations on the Prescreened External Organizations list.
* Once submitted, all information provided by an external organization in response to this profile solicitation is considered public information and must be shared upon request, except as may be exempted from public records disclosure by NC General Statute, Chapter 132, 1.1-1.2.
* The NCDPI is not responsible for any technical difficulty the organization may experience during the completion of the survey submission.

**NONPROFIT STATUS CERTIFICATION**

Applicants are required to submit one of the following documents that demonstrates that your agency is a nonprofit organization in good standing within the State of North Carolina:

1. Proof that the Internal Revenue Service currently recognizes the agency as an organization to which contributions are tax deductible under Section 501(c)(3) of the Internal Revenue Code;
2. A certified copy of the agency's certificate of incorporation or similar document if it clearly establishes the nonprofit status of the agency; or
3. Any item described in paragraphs (1) and (2) if that item applies to a State or national parent organization, together with a statement by the State or parent organization that the applicant is a local nonprofit affiliate.

By checking each of the boxes below, the applicant is certifying that all information contained within them is accurate. Please note that NCDPI will verify the organization’s nonprofit status using the State and Federal suspended or debarred vendor list upon the submission of the External Organization Profile and periodically thereafter.

*Double-click on the gray text box field; applicant will then be prompted to confirm the data field should be “checked.”*

**[ ]** The applicant certifies the organization is a nonprofit entity in good standing with the State of North Carolina and is not currently included on any state or federal suspended or debarred vendor list.

**[ ]** The applicant understands the External Organization Profile is considered incomplete without proof of nonprofit status, as specified above. The applicant acknowledges that the nonprofit documentation must be returned along with the other application elements by the established due date.

**CONTACT INFORMATION**

*Directions for completing form: Single-click on gray textboxes and begin entering text; as you type, the field will expand automatically. Enter “N/A” if not applicable.*

Name of Organization:

Address 1:

Address 2 (if necessary):

City:       Zip:

County:

Website URL for Organization:

Contact Person for Organization:

Title of Contact Person:

Phone Number:       Fax Number:

Email Address:

**Enter Contact Information below for Second Contact Person (as appropriate or needed):**

Contact Person #2 for Organization (as appropriate):

Title of Contact Person #2:

Phone Number #2:       Fax Number #2:

Phone Number #2:

Email Address #2:

**DATA INTEGRITY AND CONFIDENTIALITY CERTIFICATION**

Inclusion on the Prescreened External Organization Profile list indicates the applicant’s interest in working with North Carolina’s Public Schools as well as the students, teachers, administrators, and parents associated with those schools. As a result, the applicant organization may encounter data generated by the North Carolina Department of Public Instruction or local school districts which is confidential under state law, federal law, or both state and federal law.

All personally identifiable information is to be protected in adherence with the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. §12329, 34 C.F.R. Part 99. Accordingly, the organization must refrain from including personally identifiable information\* in any form of communication with anyone outside of the project. This includes emails, instant messaging, faxes, other written correspondence, advertising, and any type of verbal conversation. When conversing with any LEA or school employees about any students, staff, schools, or LEAs in the execution of my assigned duties, the organization must take all necessary precautions to protect the confidentiality of all personally identifiable information. Adherence to FERPA means meeting each of the detailed items below. Check off each item to certify the applicant’s full understanding and adherence to the policy.

*Double-click on the gray text box field; applicant will then be prompted to confirm the data field should be “checked.”*

**[ ]**  The applicant certifies that the organization, and all agents, employees, and staff members within this organization, will comply with all laws and regulations governing the confidentiality of student records including, but not limited to the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. §12329, 34 C.F.R. Part 99.

**[ ]** All personally identifiable information is to be protected in adherence with the Family Educational Rights and Privacy Act (FERPA) guidelines. I will refrain from including personally identifiable information in any form of communication with anyone outside of the project. This includes emails, instant messaging, faxes, other written correspondence, advertising, and any type of verbal conversation. When conversing with any LEA or school employees about any students, staff, schools, or LEAs in the execution of my assigned duties, I will take all precautions to protect the confidentiality of all personally identifiable information.

**[ ]** In all respects comply with the provisions of FERPA. For purposes of this agreement, “FERPA” includes any amendments or other relevant provisions of federal law, as well as all requirements of Chapter 99 of Title 34 of the Code of Federal Regulations. Nothing in this agreement may be construed to allow either party to maintain, use, disclose or share student information in a manner not allowed by federal law or regulation.

**[ ]** Use the data shared under this agreement for no purpose other than work authorized under Section 99.31(a)(6) of Title 34 of the Code of Federal Regulations. The applicant further agrees not to share data received under this Confidentiality Agreement with any other entity without the NCDPI approval. 21st CCLC grantee agrees to allow the Office of the State Auditor, subject to FERPA restrictions, access to data shared under this agreement and any relevant records of the applicant for purposes of completing authorized audits of the parties.

**[ ]** Maintain all data obtained pursuant to this agreement in a secure computer environment and not copy, reproduce or transmit data obtained pursuant to this agreement except as necessary to fulfill the purpose of the original request. All copies of data of any type, including any modifications or additions to data from any source that contains information regarding individual students, are subject to the provisions of this agreement in the same manner as the original data. The ability to access or maintain data under this agreement shall not under any circumstances transfer from the applicant to any other institution or entity.

**[ ]** Not to disclose any data obtained under this agreement in a manner that could identify an individual student, except as authorized by FERPA, to any other entity. The applicant agrees to abide by the NCDPI “small numbers” policy of deleting all data items that include any group of students less than five (5).

**[ ]** Not to provide any data obtained under this agreement to any party ineligible to receive data protected by FERPA or prohibited from receiving data from any entity by virtue of a finding under Section 99.31(6)(iii) of Title 34, Code of Federal Regulations.

**[ ]** Destroy all data obtained under this agreement when it is no longer needed for the purpose for which it was obtained. Nothing in this agreement authorizes the applicant to maintain data beyond the time period reasonably needed to complete the purpose of the request. All data no longer needed shall be destroyed or returned to the NCDPI in compliance with 34 CFR Section 99.35(b)(2).

\*PERSONALLY IDENTIFIABLE INFORMATION (PII): Any information about an individual maintained by an agency, including any information that can be used to distinguish or trace an individual's identity such as name, social security number, date or place of birth, mother's maiden name, biometric records, and any other personal information that is linked or linkable to an individual.

**EXPERIENCE with OUT-OF-SCHOOL-TIME PROGRAMMING**

*For check-off items, double-click on the gray text box field; applicant will then be prompted to confirm the data field should be “checked.” For items requesting text input, single-click on gray textboxes and begin entering text; as you type; the field will expand automatically.*

1. Please select your organization's years of experience in operating or delivering services to out-of-school time (OST) programs and activities:

**[ ]**  5 years

[ ]  6-10 years

[ ]  11-15 years

[ ]  16 years or more

1. Please list all professional organizations (e.g., National Afterschool Association,

North Carolina Center for After School Programs (NC CAP), Foundations Inc., Afterschool Alliance, etc.) of which any of your staff are members, if applicable.

1. Please indicate the total number of staff in your organization.

1. Please indicate the number of staff members with experience in out-of-school time programs.

1. Please select the demographic area where your organization has experience (check all that apply).

[ ]  Urban

[ ]  Suburban

[ ]  Rural

1. For content areas (A) through (H) below, please indicate the number of years your organization has provided a record of success in running or working with OST programs and activities in each area listed below. **Input a zero (0) next to areas where services were not provided.**

*Note, to maintain eligibility for possible inclusion on the profile list, the applicant nonprofit organization must have a record of success for five (5) or more years in one or more of the listed activities or content areas.*

*Single-click on gray textboxes to enter #.*

1. **Programming and Activities Number of Years**

English/Language Arts/Literacy/Writing Enrichment

Math Enrichment

Art, Music, Media, and Drama

Civic Engagement and Service­ Learning

Financial Literacy

Environmental Literacy

Project-Based Learning

Science, Technology, Engineering, Math

Sports and Recreation

Summer Programming

Workforce Development

1. **Development and Empowerment Number of Years**

Adolescent and Youth Culture

Child and Adolescent Development

Personal Development and Life Skills

Positive Youth Development

1. **Human Relationships - Number of Years**

Behavior Guidance and Classroom Management

Communicating Effectively with Staff,

Students, and Families

Positive Discipline Techniques

Social and Emotional Learning

1. **Health, Wellness, Safety, and Nutrition Number of Years**

Fitness and Nutrition

Indoor and Outdoor Environments

Physical Health and Wellness

Program Safety

1. **Cultural Competence and Inclusion Number of Years**

Children in Poverty

Faith-Based Programming

Learning Differences

Race, Gender, and Sexual Identity

Students with Disabilities

Undocumented Newcomers

1. **Engaging Families, Schools, and Communities Number of Years**

Coordination and Linkages of Resources

Connecting to Schools

Creating Community Partnerships

Engaging Parents and Families

Homeless and Migrant Populations

1. **Quality Programming Number of Years**

Action Planning

Coaching and Mentoring

Logic Models and Outcomes Measurement

Program Design

Quality Assessments and Surveys

Research and Evaluation

1. **Management and Administration Number of Years**

Advocacy and Policy

Budgeting and Fiscal Management

Citywide and Statewide Systems

Fundraising and Development

Human Resources and Supervision

Marketing and Promotion

Program Management

Recruitment and Retention

Regulations and Licensing

Utilizing Technology and Social Media

Volunteers and Volunteer Management

**APPLICATION CERTIFICATION**

By signing below, the Chief Administrative Officer/Owner/Designee is certifying he or she has done the following:

* Read and understood all necessary requirements;
* Ensured the organization meets the criteria outlined;
* Ensured all sections of this form are complete, including the additional documentation regarding the organization’s nonprofit status; and
* Ensured the contents of the application are completely accurate to the best of his or her knowledge.

**Name of Nonprofit Organization:**

**Title of Organization Chief Administrator/Owner/Authorized Designee:**

*For the printed name and signature below, handwrite in black or blue ink. Electronic signatures will not be accepted as valid authorization.*

|  |
| --- |
|  |
| **(Printed Name of Chief Administrator/Owner/Authorized Designee)** |
|  |
| **(Signature of Chief Administrator/Owner/Authorized Designee)** |
|  |
|  |
| **(Date)** |