

Check one only

- Arts
- Foreign Language

FY 2014

**Arts and Foreign Language  
Planning Assistance Grant**

INSTRUCTIONS:

*Submit 1 original and 7 copies to  
Illinois Arts Council Agency  
Attn: Arts and Foreign Language  
James R. Thompson Center  
100 West Randolph, Suite 10-500  
Chicago, IL 60601*

APPLICANT INFORMATION

DISTRICT NAME AND NUMBER	REGION-COUNTY-DISTRICT-TYPE-CODE
FEIN (Federal Employer Identification Number)	DUNS NUMBER
SUPERINTENDENT / AUTHORIZED OFFICIAL (notification)	PROGRAM CONTACT
TITLE	TITLE
ADDRESS (Street, City, State, Zip Code)	ADDRESS (Street, City, State, Zip Code)
TELEPHONE                      FAX	TELEPHONE                      FAX
E-MAIL	E-MAIL

Request Amount	Type of District	Grade levels to be served	Estimate number of students served	Please indicate the number of your legislative districts
_____	<input type="checkbox"/> Unit District	_____	_____	Congressional _____
	<input type="checkbox"/> High School District	_____	_____	Senate _____
	<input type="checkbox"/> Elementary District	_____	_____	House _____

STATEMENT OF ASSURANCES

The applicant HEREBY AGREES THAT:

1. The activities and services for which assistance is sought will be administered by or under the supervision of the applicant.
2. Any funds received under this grant shall not be used to supplant funds normally budgeted for services of the same type.
3. It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 200D); and FURTHER AGREES THAT it will comply with Title VII of the Civil Rights Act of 1964 (42 U.S.C. 200e) as amended by the Equal Employment Opportunities Act of 1972 (Public Law 92-261) and the Americans with Disabilities Act of 1990 (Public Law 101-336), and the

- Constitution of the State of Illinois (article 1 section 17-19); and FURTHER AGREES THAT it will comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 706); and FURTHER AGREES THAT it will comply with Title IX of the Education Amendment of 1972 (20 U.S.C. 1981); and FURTHER AGREES THAT it will comply with the Age Discrimination Act of 1975 (Public Law 94-135, Title III, Article 303).
4. The figures, facts and representation in this application, including all exhibits and attachments, are true and correct to the best of its knowledge and belief.
  5. The filing of this application has been authorized by the governing board of the applicant.

6. It will expend funds received as a result of this application solely on the described projects and programs and will separately provide funds for the maintenance of the organization.
- THIS ASSURANCE is binding on the Applicant, its successors, transferees and assignees. The person (or persons) whose signature appears below is authorized to sign this Assurance on behalf of the Applicant.

I certify that the program administrator / contact person identified above is authorized to act on behalf of the institution with regards to the Arts and Foreign Language Planning Assistance Grant.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ORIGINAL SIGNATURE of Superintendent or Authorized Official

FY 2014

**Arts and Foreign Language  
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DISTRICT NAME AND NUMBER

REGION-COUNTY-DISTRICT-TYPE-CODE

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INSTRUCTIONS: Describe in 300 words or less the ways in which the school district intends to utilize grant monies by providing overall objectives and activities of the project. Do not to exceed one page.

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DISTRICT NAME AND NUMBER	REGION-COUNTY-DISTRICT-TYPE-CODE	
<p>INSTRUCTIONS: Respond to each of the following:</p> <p><b>a. Need:</b> Indicate the needs to be met or problems to be addressed by the proposed planning process. This description should at least include: how the need was determined; information about the arts or foreign language program currently offered, as applicable; the percentage of students participating; staffing considerations; equitable access to the programs among the applicant’s schools and students; and availability of community resources or support to assist in planning the proposed program.</p>	<p><b>b. Proposed Planning Process:</b> Indicate who will participate in the comprehensive, district-based planning process, why they were chosen to participate, and the responsibilities they will have during the process. Participants must represent each category identified in the “Background and Program Specifications” section of the RFP.</p> <p><b>c. Proposed Program:</b> Describe the implementation program to include: the specific areas of instruction to be offered (e.g., visual arts, vocal music, French); the grade levels to be targeted; the number of schools to be involved; the steps to be taken to ensure that the program will be aligned to the applicable Illinois Learning Standards; and</p>	<p>how the proposed program will address the needs described under item (a).</p> <p><b>d. Sustainability:</b> Describe how local resources (e.g., monetary, material, human) will be used or redeployed to ensure that the arts or foreign language program is implemented after the planning grant ends. Describe the commitment of the district and building administrators to long-term implementation of the program. Include any community resources that will be made available for program implementation and ongoing support.</p>

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*Duplicate as needed*

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DISTRICT NAME AND NUMBER

REGION-COUNTY-DISTRICT-TYPE-CODE

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INSTRUCTIONS: Proposal narrative continued. Instructions on Attachment 3 page 1.

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INSTRUCTIONS: List the objectives and activities of the proposed project in a time-specific format. All objectives must include an explanation of the activity, a timeline for said activity (i.e., start and completion dates) and person(s) responsible. Use one page for each objective.

OBJECTIVE:

ACTIVITY	TIMELINE		PERSONS RESPONSIBLE
	START	COMPLETION	

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BUDGET SUMMARY

ILLINOIS ARTS COUNCIL AGENCY

ATTACHMENT 5

DISTRICT NAME AND NUMBER

FY 2014

*Note: use whole dollars only.  
Omit dollar signs, commas,  
and decimal places.*

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\_\_ INITIAL BUDGET    \_\_ REVISED INITIAL BUDGET

\_\_ AMENDMENT # \_\_    \_\_ Upward    \_\_ Downward    \_\_ Level

Directions: Prior to preparing this Budget Summary, please refer to the "State and Federal Grant Administration Policy and Fiscal Requirements Procedures" handbook that can be accessed at [http://www.isbe.net/funding/pdf/fiscal\\_procedure\\_handbk.pdf](http://www.isbe.net/funding/pdf/fiscal_procedure_handbk.pdf). The grant period will begin no sooner than May 26, 2014, and will extend from the execution date of the grant until November 15, 2014.

LINE	1 FUNCTION NUMBER	2 EXPENDITURE ACCOUNT	3 SALARIES  (Obj. 100)	4 EMPLOYEE BENEFITS  (Obj. 200)	5 PURCHASED SERVICES (Obj. 300)	6 SUPPLIES & MATERIALS (Obj. 400)	11 TOTAL
7	2210	Improvement of Instruction Services					
10	2300	General Administration Capped at 5%					
26	4000	Payments to Other Educational and Governmental Units					
28	TOTAL DIRECT COSTS						
30	TOTAL BUDGET						

\_\_\_\_\_  
Date

\_\_\_\_\_  
ORIGINAL SIGNATURE  
of Superintendent or Authorized Official

DISTRICT NAME AND NUMBER

FY 2014

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**Arts and Foreign Language  
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1 FUNCTION NUMBER	2 EXPENDITURE DESCRIPTION & ITEMIZATION	3 SALARIES (Obj. 100)	4 EMPLOYEE BENEFITS (Obj. 200)	5 PURCHASED SERVICES (Obj. 300)	6 SUPPLIES & MATERIALS (Obj. 400)	11 TOTAL
TOTAL						

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TOTAL						

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1. No subcontracting for the preparation or management of this grant program is allowed under this grant.
2. Each recipient of a grant under this program will be required to submit a final performance report, no later than 30 days following the end of the grant period, that:
  - a. outlines the activities completed with grant funds; and
  - b. summarizes the long-term commitment to implementing the program.

The report also must present an action plan to implement arts or foreign language instruction. Details regarding this report will be available at Illinois Arts Council Agency's Arts and Foreign Language Assistance Grants web page. Information about accessing the requirements will be provided to all grantees before the end of the grant period.

3. Grantees must participate in any future evaluation conducted by the Illinois Arts Council Agency, the Illinois State Board of Education, or an independent evaluator.

The undersigned affirms, under penalties of perjury, that he or she is authorized to execute the terms of the set forth above on behalf of the applicant.

\_\_\_\_\_  
Name of Applicant

By:

\_\_\_\_\_  
Date

\_\_\_\_\_  
ORIGINAL SIGNATURE  
of Superintendent or Authorized Official

\_\_\_\_\_  
Title