



GRANT APPLICATION
 DEPARTMENT OF PUBLIC INSTRUCTION
 Rev. 07/2016

Applicant Organization (Grantee)	Grantee Contact Person	DPI Contact Person Gail Schauer		Title of Project Student Assessment Audit	
Mailing Address	City	State	Zip Code	Telephone	Email

PROJECT PERIOD:

Beginning Date (MM/DD/YY) 08/10/2016	Ending Date (MM/DD/YY) 06/30/2017
---	--------------------------------------

PROJECT NARRATIVE:

Brief Description of Project (or attach). Include number of individuals on the team. Funds may be requested for travel expenses to Bismarck for training and stipends for team members to work on project. An example might be to request funding for the core subcommittee to meet 2-3 hours a month for five months and additional committee members to meet for 1 hour a month for five months.

PROJECT BUDGET:

Object Code	Description	Proposed Budget	Approved Budget
110 Professional Salary			
120 Non-professional Salary			
200 Employee Benefits			
580 Travel			
600 Supplies & Materials			
Grand Total			

Name of Authorized Official	Title	Signature	Date
-----------------------------	-------	-----------	------

FOR DEPARTMENT USE ONLY

TERMS AND CONDITIONS:

The grantee agrees to conduct this grant award within the guidelines issued by the Department of Public Instruction (NDDPI) and to comply with the "General Requirements for Federal Programs" document on DPI's website.		Funding Source : <input type="checkbox"/> State <input type="checkbox"/> Other <input type="checkbox"/> Federal: CFDA#: FAIN#:			
	Dept ID: 5000	Fund:	Project Number:	Activity:	Class:
Approved By:			Amount Approved:		Date:
Director Signature:					Date: