



SPECIAL EDUCATION DISCRETIONARY GRANT APPLICATION

NORTH DAKOTA DEPARTMENT OF PUBLIC INSTRUCTION

SPECIAL EDUCATION

SFN 12374 (03/2017)

Instructions for completing this form are on Page 2. Complete one form per application.

1. Applicant Organization Name	2. Applicant DUNS Number		
3. Applicant Organization Address	City	State	ZIP Code

4.a Project Name	4.b Application Deadline
------------------	--------------------------

5. Brief Description of Project (or attach)

--

6. Project Period (must be between these dates: ___/___/___ and ___/___/___)

Beginning Date (MM/DD/YY)	Ending Date (MM/DD/YY)
---------------------------	------------------------

7. Budget Summary (Attach a project narrative that includes a **Budget Justification**.)

Applicant's Participation

Budget Category	Federal Funds	State Funds	Local Funds	Other Funds	Total
Personnel 100					
Consultant Services 300					
Travel 500					
Consumable Supplies 600					
Equipment 700					
Other 800					
TOTALS					

8. Terms and Conditions

The grantee agrees to conduct this grant award within the guidelines issued by the Department of Public Instruction (DPI) and to comply with the "Fiscal Requirements for Federal Programs" found on NDDPI's website. A final invoice and performance report will be submitted within 30 days after project's end date.

Signature of Authorized Official/Project Director	Typed Name	Date
Title	Telephone Number	
Signature of Chairperson of Applicant's Governing Board	Typed Name	Date
Address	City	State ZIP Code

9. State Use Only

Prime Award FAIN Number	Prime Award Sponsor	CFDA Number
Project Number	Activity Code	Class 20167
Approved By	Amount	Date

INSTRUCTIONS

This application form must be completed by all applicants requesting funding for an IDEA-B Discretionary Grant from the Department of Public Instruction. The application must be fully completed and signed by the applicant's authorized official and chairperson of the applicant's governing board. The entire application should be typewritten. Submit the application to:

Department of Public Instruction
Office of Special Education
600 E. Blvd. Ave., Dept. 201
Bismarck, ND 58505-0440

Please read and follow the instructions carefully. Questions and inquiries should be directed to the Special Education office at (701) 328-2277.

1. **APPLICANT ORGANIZATION:** The special education unit (or other organization) that will assume programmatic and fiscal accountability for the use and disposition of federal subaward grants awarded on the basis of this application.
2. **APPLICANT DUNS NUMBER:** required for federal reporting purposes.
3. **ADDRESS OF APPLICANT ORGANIZATION:** Provide the mailing address of the organization.
- 4.a **PROJECT NAME:** enter a name if not pre-filled
4. b **APPLICATION DEADLINE:** last date that applications will be accepted for review (call NDDPI if this is blank.)
5. **BRIEF DESCRIPTION OF PROJECT:** Provide an abbreviated and informative summary of the project's purpose and expected accomplishments. Information should be sufficient to allow its use to publicize the project.
6. **PROJECT PERIOD:** Indicate project beginning and ending dates. The beginning date cannot be earlier than the project application deadline. The project period must be between the dates listed. Final reports are due on or before 30 days after the completion of the project.
7. **BUDGET SUMMARY:** Show all financial resources, by budget category, to be allocated to the project. Be sure that figures agree with figures in the Budget Justification included in the Project Narrative Section of this application. Spending is only allowed in preapproved categories. Expenditures per line item may not increase more than 10 percent of total award without an authorized budget revision. Total federal fund reimbursement may not exceed approved amount.
8. **TERMS AND CONDITIONS - SIGNATURES:** Self-explanatory.
9. **STATE OFFICE USE ONLY:** Self-explanatory.