



Wisconsin Department of Public Instruction
**AMERICAN INDIAN LANGUAGE
 REVITALIZATION GRANT**
 PI-9930 (Rev. 03-2020)

INSTRUCTIONS: Submit **original** and three (3) copies.
 Application must be received or postmarked no later than
MONDAY, MAY 18, 2020. Late applications will not be accepted.
 Return to:

**WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION
 AMERICAN INDIAN LANGUAGE REVITALIZATION GRANT
 ATTN: DAVID O'CONNOR
 PO BOX 7841
 MADISON, WI 53707-7841**

For questions regarding this grant, contact:
 David O'Connor at (608) 267-2283 or david.oconnor@dpi.wi.gov

I. GENERAL INFORMATION			
Applicant Agency		Mailing Address <i>Street, City, State, Zip</i>	
Contact Person		Title	
Mailing Address <i>Street, City, State, Zip If other than Applicant Agency Address</i>			
E-Mail Address		Fax <i>Area/No.</i>	Telephone <i>Area/No.</i>
Tribal Education Authority		Mailing Address <i>Street, City, State, Zip</i>	
Program Coordinator <i>If other than contact person.</i>		Title	
E-Mail Address			Telephone <i>Area/No.</i>
Program Coordinator's Mailing Address, <i>Street, City, State, Zip</i>		Grant Period	
		Beginning Date <i>Mo./Day/Yr.</i>	Ending Date <i>Mo./Day/Yr.</i>
		7/1/2020	6/30/2021
Total Funds Requested	No. of Student Participants	Project Title	

II. ABSTRACT

A school board, consortium of school boards, CESA, or head start agency, in conjunction with a tribal education authority, may apply to the department (Wisconsin Department of Public Instruction) for a grant for the purpose of supporting innovative, effective instruction in one or more American Indian languages. Such a grant shall include one or more activities related to providing instruction in a tribal language as either a curricular or co-curricular offering. Funds may be used for language activities including, but not limited to, curriculum design, creation of appropriate assessment instruments, professional development activities, language-focused parent and community engagement activities, instructional delivery, and program evaluation. Summarize the purpose and expected outcome of this language grant. Include all the key points necessary to communicate the proposed use of grant funds. *Limit response to space provided.*

III. ASSURANCES

Assurance is hereby provided that:

- 1. Applicant agrees** to comply with all terms and conditions set forth in the grant program's Application Guidelines document provided with this application. Services provided under this grant will be used to address the needs set forth in the guidelines document. Applicant agrees to implement the activities within the prescribed timeline as outlined in their work plan section of their proposal. Applicant will provide fiscal information within the fiscal year timeline established for new and reapplying programs. Wis. Stat. § 35.93; Wis. Admin. Code § PI 38.008 (Grant reporting).
- 2. Legal and Regulatory Compliance:** Administration of the program, activities, and services covered by this application will be in accordance with all applicable state and federal statutes, regulations, and the approved application.
- 3. Allowable Costs:** Costs incurred shall be allowable and meet grant goals and objectives.
- 4. Confidentiality:** The Applicant shall comply with provisions applicable to public schools regarding confidentiality of student information for any pupil record created, obtained, or maintained under this grant, regardless of whether those provisions would not otherwise apply to the Applicant but for the Applicant's participation in this grant. Wis. Stat. § 118.125 (Pupil records).
- 5. Conflict of Interest:** No board or staff member of an LEA or CESA may use his or her position to obtain financial gain or anything of substantial value for the private benefit of himself or herself or his or her immediate family, or for an organization with which he or she is associated, such as a royalty, commission, contingent fee, brokerage fee, consultant fee, or other benefit. Wis. Stat. § 19.59(1)(a).
- 6. Contracts and Procurement:** The Applicant will use its own procurement procedures that reflect applicable state and local laws and regulations.
- 7. Cooperation with Evaluation:** The Applicant shall cooperate with the performance of any evaluation of the program by the WDPI or by their contractors. Wis. Stat. § 35.93; Wis. Admin. Code § PI 38.008 (Grant reporting).
- 8. Copyright, Acknowledgement, and Publications:** The Applicant/Recipient will comply with all copyright and materials acknowledgement requirements as addressed in the projects' grant guidelines. The WDPI reserves a royalty-free, nonexclusive, and irrevocable license to reproduce, publish or otherwise use, and to authorize others to use, for WDPI purposes: the copyright in any work developed under this grant; and any rights of copyright to which the Applicant or a contractor purchases ownership with grant support.



The content of any grant-funded publication or product may be reprinted in whole or in part, with credit to the WDPI acknowledged. However, reproduction of this product in whole or in part for resale must be explicitly authorized by the WDPI. When issuing statements,

- press releases, and other documents describing projects or programs funded in whole or in part with grant funds, the grant award recipient shall clearly acknowledge the receipt of grant funds in a statement.
- 9. Fiscal Control:** The Applicant will use fiscal control and fund accounting procedures and will ensure proper disbursement of, and accounting for, funds received and distributed under this program Wis. Stat. § 16.41 (Agency and authority accounting; information; aid).
 - 10. Indirect Costs:** If the fiscal agent is allowed to claim indirect costs, the total amount budgeted for indirect costs is limited to and cannot exceed the negotiated indirect rate established with the WDPI. Indirect costs cannot be charged against capital objects.
 - 11. Programmatic Changes:** The Applicant will obtain the prior approval of the WDPI whenever any of the following actions is anticipated:
 - a. Any revision of the scope or objectives of the project;
 - b. Changes in key persons where specified in the application or grant award;
 - c. A disengagement from the project for more than three months, or a 25 percent reduction in time devoted to the project, by the approved project director;
 - d. Contracting out or otherwise obtaining services of a third party to perform activities central to the purpose of the award;
 - e. Changes in the amount of approved cost-sharing or matching provided by the grant recipient.
Wis. Stat. § 35.93; Wis. Admin. Code § PI 38.008 (Grant reporting).
 - 12. Record Retention: The applicant will ensure records created or obtained under this grant are maintained in** accordance with the *Wisconsin Records Retention Schedule for School Districts*, regardless of whether this retention schedule would not otherwise apply to the Applicant but for the Applicant's participation in this grant. The retention schedule is available online here:
<http://publicrecordsboard.wi.gov/docview.asp?docid=15892&locid=165>
 - 13. Reporting:** The Applicant will ensure all required financial and program data and information is reported to the WDPI timely on a schedule established by the WDPI. Wis. Stat. § 35.93; Wis. Admin. Code § PI 38.008 (Grant reporting).
 - 14. Grant Evaluation:** The Applicant shall ensure that all grant evaluation reporting will be timely on a schedule established by the WDPI. Grant evaluation information provided to the WDPI staff shall accurately assess the completeness of grant goals, activities, benchmarks and target dates. Wis. Stat. § 35.93; Wis. Admin. Code § PI 38.008 (Grant reporting).

IV. CERTIFICATION/SIGNATURES

WE, THE UNDERSIGNED, CERTIFY that the information contained in this application is complete and accurate to the best of our knowledge; that the necessary assurances of compliance with applicable state and federal statutes, rules, and regulations will be met; and, that the indicated agency designated in this application is authorized to administer this grant.

WE FURTHER CERTIFY that the assurances listed above have been satisfied and that all facts, figures, and representation in this application are correct to the best of our knowledge.

Signature of Applicant Agency Administrator 	Date Signed <i>Mo./Day/Yr.</i>
Signature of School Board Clerk <i>If applicable</i> 	Date Signed <i>Mo./Day/Yr.</i>

V. CONSORTIUM VERIFICATION

EACH OF THE UNDERSIGNED CERTIFIES that the information contained in this application is complete and accurate, that the local educational agency they represent has authorized them to enter into a consortium agreement, and to provide the necessary assurances of compliance with applicable state and federal statutes, rules, and regulations.

The administering agency shall be the fiscal agent and shall thereby incur and record all expenditures of funds available per applicable program provisions, rules, and regulations.

ADMINISTERING AGENCY-Required

Administering Agency	Date Signed <i>Mo./Day/Yr.</i>
----------------------	--------------------------------

Agency Administrator	Signature ➤
----------------------	----------------

**CONSORTIUM PARTICIPANT-TRIBAL EDUCATION AUTHORITY
Required**

1. Tribal Education Authority	Date Signed <i>Mo./Day/Yr.</i>
-------------------------------	--------------------------------

Representative of Tribal Education Authority	Signature ➤
--	----------------

Street Address	City	State WI	Zip
----------------	------	-------------	-----

Email Address	Phone Number <i>Area Code/No.</i>
---------------	-----------------------------------

2. Tribal Education Authority	Date Signed <i>Mo./Day/Yr.</i>
-------------------------------	--------------------------------

Representative of Tribal Education Authority	Signature ➤
--	----------------

Street Address	City	State WI	Zip
----------------	------	-------------	-----

Email Address	Phone Number <i>Area Code/No.</i>
---------------	-----------------------------------

3. Tribal Education Authority	Date Signed <i>Mo./Day/Yr.</i>
-------------------------------	--------------------------------

Representative of Tribal Education Authority	Signature ➤
--	----------------

Street Address	City	State WI	Zip
----------------	------	-------------	-----

Email Address	Phone Number <i>Area Code/No.</i>
---------------	-----------------------------------

*Funds must be those that supplement services and not supplant funds from other sources.

CONSORTIUM PARTICIPANT-TRIBAL EDUCATION AUTHORITY (cont'd)
Required

4. Tribal Education Authority	Date Signed <i>Mo./Day/Yr.</i>
-------------------------------	--------------------------------

Representative of Tribal Education Authority	Signature ➤		
Street Address	City	State WI	Zip
Email Address		Phone Number <i>Area Code/No.</i>	

5. Name of School District	Date Signed <i>Mo./Day/Yr.</i>
----------------------------	--------------------------------

Representative of School District	Signature ➤		
Street Address	City	State WI	Zip
Email Address		Phone Number <i>Area Code/No.</i>	

6. Name of School District	Date Signed <i>Mo./Day/Yr.</i>
----------------------------	--------------------------------

Representative of School District	Signature ➤		
Street Address	City	State WI	Zip
Email Address		Phone Number <i>Area Code/No.</i>	

7. Name of School District	Date Signed <i>Mo./Day/Yr.</i>
----------------------------	--------------------------------

Representative of School District	Signature ➤		
Street Address	City	State WI	Zip
Email Address		Phone Number <i>Area Code/No.</i>	

*Funds must be those that supplement services and not supplant funds from other sources.

VI. LANGUAGES SERVED
Limit response to space provided

List American Indian language or languages being supported. *Include a description of the innovative instruction to be used in supporting the language(s).*

VII. PROGRAM TEAM

Limit response to space provided.

List the project's program development and leadership team members. Be certain to also include names and titles and to indicate relevant experience or expertise.

VIII. STATEMENT OF NEED

Limit response to space provided

Provide background data and related information to justify the selection of this project. The narrative will provide the reader with sufficient evidence that this project is of such size, scope, and quality as to be effective. Be specific. Include measurable baseline data. Give examples.

IX. IDENTIFICATION/SELECTION PROCESS

Limit response to space provided.

Describe the process used for identifying and selecting participating pupils.



X. GOALS/OBJECTIVES
Limit response to space provided

Identify measurable goals/objectives that are based upon a thorough assessment of data related to the identified needs of the project. Goals and objectives for the grant may be developed to be in place for multiple years. When developing goals and objectives, keep in mind the overall purpose of the project and provide a baseline against which progress will be measured. Provide a description of the proposed activities and a timeline for the grant proposal implementation, including a plan for continuation and growth of the program beyond the grant. Detail activities and timelines planned to reach these goals and objectives in Section XIII.

XI. INSTRUCTIONAL STRATEGIES
Limit response to space provided

Describe how instruction will occur and be supported, including any of the following:

- Instructional technique—e.g., master apprentice, immersion.
 - Instructional setting(s)—e.g., in school, outside projects.
 - Content emphasis—service learning, projects, history and culture.
 - Other Support—language modeled by elders or other fluent speakers, community resources, school resources.
-
-

XII. EVALUATION PLAN
Limit response to space provided

The evaluation is defined as a continuous process of systematically gathering, analyzing, and interpreting data and information upon which decisions can be made relative to the effectiveness and efficiency of the project. Include evaluation procedures referencing back to the needs assessment data that was provided in Section VIII, as well as referencing the collection of any other baseline data to determine whether the project's goals and objectives are being met.

XIII. ACTIVITIES/TIMELINE

Local Plan: For each objective identified in Section X, develop a chronological list of activities.

Baseline/Measurable Objectives/Outcomes	Activity	Date To Be Accomplished	Plan for Continuation and Growth of Program	Budgeted Amount	
				Grant Funds	<i>If Applicable*</i> Other <i>Identify Source</i>

*Funds must be those that supplement services and not supplant funds from other sources.

XIII. ACTIVITIES/TIMELINE (cont'd)

Baseline/Measurable Objectives/Outcomes	Activity	Date To Be Accomplished	Plan for Continuation and Growth of Program	Budgeted Amount	
				Grant Funds	<i>If Applicable*</i> Other <i>Identify Source</i>

*Funds must be those that supplement services and not supplant funds from other sources.

XIV. BUDGET SUMMARY				
Applicant Agency	Grant Period Begin	7/1/2020	Initial Request	Date Submitted First Revision
Project Number <i>For DPI Use Only</i>	End	6/30/2021		Second Revision

Budget Revisions: Submit a copy of this page, with appropriate revisions included. (Attach this to a brief letter of justification.) **Note:** Submit request at least **30 days** prior to expenditure of grant monies. If a field should be left blank, you must enter a zero "0" in that field.

WUFAR Function	WUFAR Object	Amount Requested	First Revision	Second Revision
Instruction (100 000 Series) Activities dealing directly with the interaction between instructional staff and students.	a. Salaries (100s)			
	b. Fringe Benefits (200s)			
	c. Purchased Services (300s)			
	d. Non-Capital Objects (400s)			
	e. Capital Objects (500s)			
	f. Other Objects (e.g., fees) (900s)			
	TOTAL Instruction			
Support Services—Pupil and Instructional Staff Services (in 210 000 and 220 000 Series) Support services are those which facilitate and enhance instructional or other components of the grant. This category includes staff development, supervision, and coordination of grant activities.	a. Salaries (100s)			
	b. Fringe Benefits (200s)			
	c. Purchased Services (300s)			
	d. Non-Capital Objects (400s)			
	e. Capital Objects (500s)			
	f. Other Objects (e.g., fees) (900s)			
	TOTAL Support Services—Pupil / Instructional Staff Services			
Support Services—Administration (Associated with functions in 230 000 series and above.) Includes general; building; business; central service administration, and insurances.	a. Salaries (100s)			
	b. Fringe Benefits (200s)			
	c. Purchased Services (300s)			
	d. Non-Capital Objects (400s)			
	e. Capital Objects (500s)			
	f. Insurance (700s)			
	g. Other Objects (e.g., fees) (900s)			
	TOTAL Support Services—Admin.			
Indirect Cost	Approved Rate			
TOTAL BUDGET				
DPI Approval	Signature of DPI Reviewer ➤			Date Signed <i>Mo./Day/Yr.</i>

*Funds must be those that supplement services and not supplant funds from other sources.