**2019-20 MLTI Grant Application Materials: Application for a 1:1 Program**

(1) School Name and Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(2) SAU Name and Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(3) Name, email and phone number for contact person who can provide more information about this application:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(4) Requesting grant for (check all that apply):

\_\_\_\_\_\_\_\_ 7/8 students and staff (grants for student and staff devices)

\_\_\_\_\_\_\_\_ 9/12 staff (grants for staff devices, with locally-funded devices for students)

(5) Eligible 7/8 students (based on Attachment A) \_\_\_\_\_\_\_\_\_\_\_\_

(6) Number of eligible 7/8 staff (based on Attachment A) \_\_\_\_\_\_\_\_\_\_\_\_

(7) Number of eligible 9/12 staff (based on Attachment A) \_\_\_\_\_\_\_\_\_\_\_\_

(8) TOTAL lines 5-7 \_\_\_\_\_\_\_\_\_\_\_\_

(9) Annual grant maximum ($200 multiplied by Line 8, TOTAL) \_\_\_\_\_\_\_\_\_\_\_\_

Attachment A is found here: <http://www.maine.gov/doe/sites/maine.gov.doe/files/2019-02/AttachmentA_StudentStaffCount_MLTIGrant201920.docx>

(10) Year(s) for which grants are requested: (11) Dollar amount requested

2019-20 \_\_\_\_\_ 2019-20: \_\_\_\_\_\_\_\_\_\_

2020-21 \_\_\_\_\_ 2020-21: \_\_\_\_\_\_\_\_\_\_

2021-22 \_\_\_\_\_ 2021-22: \_\_\_\_\_\_\_\_\_\_

Please describe how you will use the grant funds to operate a 1:1 learning technology program that meets the criteria set forth here: <http://www.maine.gov/doe/sites/maine.gov.doe/files/2019-02/FINAL%202019-20%20Criteria%20for%20MLTI%20Grants_0.pdf>

Feel free to attach additional documents. Attach a budget as described in Attachment B that demonstrates that eligible expenses equal or exceed the grant amount requested. Attachment B is found here:

<http://www.maine.gov/doe/sites/maine.gov.doe/files/2019-02/201920Attachment%20B%20Budget%20Form_0.pdf>

The description must include details for each of the following:

(12) Device and Software

(13) Plans for maintenance, repair, replacement to ensure 1:1 coverage

(14) Plans for professional development and support for educators

Applications will be reviewed and approved by the Department of Education. Grant payments will be made only after the superintendent signs a state contract committing to operate the program. A report of actual expenditures and program operation must be submitted at the end of each school year, to verify that the grant paid only for eligible expenses.

By submitting this application, I am expressing my intent to operate a 1:1 learning technology program as described in this application. However, until I sign a state contract, I am not committed to carry out the program as stated in this document.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Superintendent Date