

**Application & Reimbursement Request  
FY 2024 - 2025**



**Career & Technical Education Grant  
Externships / Professional Development Request**

Basic Project Information and Externship Details

For Office Use: UFARS Code 305 Costs

Approximately \$25,000 will be available to fund Teacher Externship opportunities. The grant period is from April 2025 through June 2025 or until funding runs out.

**THE DEADLINE FOR APPLICATIONS IS APRIL 15, 2025**

**GRANT APPROVAL COMMITTEE: NESC CTE Budget Committee:**

**APPROVAL COMMITTEE: NESC CTE Budget Committee:**

The Rural CTE Grant will fund externship grants for between 80 and 200 hours. The hourly pay rate is typically \$30.00 / hour = 200 X \$30.00 = 6,000 plus 16% in benefits. Districts are limited to \$7,000 per academic year, and this may be reduced and equitably distributed to accommodate more requests. Externships must be submitted by May 30th. Externship grants are available only to licensed CTE instructors. Teachers must complete an Externship Application, which requires indicating their business partner. The Budget Committee will review applications and provide notice of approval.

**FOR REIMBURSEMENT EMAIL THIS REQUEST TO:**

*Kathy Jankila and John Engelking*

**Name of the proposed CTE Externship Project or Projects.**

Denfeld Medical Careers and Essentia



**If approved, please indicate the teacher's willingness to share their experience at a future CTE educational summit or meeting.**

Yes

**Primary Project Contact Name/Email/Phone:**

Danette Seboe, Principal CTE, [danette.seboe@isd709.org](mailto:danette.seboe@isd709.org) 218-336-8700 x 2140

**Teacher(s) Assigned to Externships Name/Email/Phone:**

Andrew Nissen / [andrew.nissen@isd709.org](mailto:andrew.nissen@isd709.org) / 218-336-8830 (ext. 3033)

**Primary Project School:**

Duluth Denfeld High School

**Primary Partners (businesses or industries)**

Essentia Health

|  |  |
|--|--|
| <b>District Number :</b>   | ISD 709  |
| <b>Proposed Project Start Date:</b>  | June 15, 2025  |
| <b>Projected number of students impacted as a result of the Externship</b>               | ~40 students annually  |
| <b>Project Grade Level(s) Impacted:</b>  | 11 and 12  |
| <b>Describe the activities, goals, and intended outcomes/student impact:</b>             | <p>In the proposed externship, I will be...</p> <p>The goal of this project is to gain experience and build a network to incorporate health practitioner experience into our coursework.</p> <p>Outcomes:</p> <ul style="list-style-type: none"> <li>- healthcare worker visits to the classroom on a quarterly basis to help show our students professional pathways in the field.</li> <li>- Bolstering lab experiences with real-world, meaningful applications</li> </ul> <p>Student Impact:</p> <ul style="list-style-type: none"> <li>- A greater understanding of the professional options they have</li> <li>- more real-world experiences in the classroom/lab</li> </ul> |
| <b>Indicate if this externship was previously funded and the source of that funding.</b> | This is a new externship.  |
| <b>Hourly Rate and Total Requested Funding Amount:</b>                                   | up to 80 hours x \$30/hr - \$2400 total request  |

**Certification & Assurances**

I certify that the information in this application is true and correct to the best of my knowledge and belief and that I have the authority to apply for the requested award and in the amount requested.

*Simone Zunich*

Signature of Business Manager

**Simone Zunich**

Printed Name

**Executive Director Business Services**

Title

**3.20.25**

Date

*Danette Seboe*

Signature of Authorized Supervisor

**Danette Seboe**

Printed Name

**Principal**

Title

**3.20.25**

Date



**Application & Reimbursement Request  
FY 2024 - 2025**



**Career & Technical Education Grant  
Externships / Professional Development Request**

*Basic Project Information and Externship Details*

*For Office Use: UFARS Code 305 Costs*

Approximately \$25,000 will be available to fund Teacher Externship opportunities. The grant period is from April 2025 through June 2025 or until funding runs out.

**THE DEADLINE FOR APPLICATIONS IS APRIL 15, 2025**


GRANT APPROVAL COMMITTEE: NESC CTE Budget Committee:

APPROVAL COMMITTEE: NESC CTE Budget Committee:

The Rural CTE Grant will fund externship grants for between 80 and 200 hours. The hourly pay rate is typically \$30.00 / hour = 200 X \$30.00 = 6,000 plus 16% in benefits. Districts are limited to \$7,000 per academic year, and this may be reduced and equitably distributed to accommodate more requests. Externships must be submitted by May 30th. Externship grants are available only to licensed CTE instructors. Teachers must complete an Externship Application, which requires indicating their business partner. The Budget Committee will review applications and provide notice of approval.

**FOR REIMBURSEMENT EMAIL THIS REQUEST TO:**

*Kathy Jankila and John Engelking*

|  |   |
|--|---|
| <p><b>Name of the proposed CTE Externship Project or Projects.</b><br/>Denfeld Culinary and OMC Chef Experience</p>  |  |
| <p><b>If approved, please indicate the teacher's willingness to share their experience at a future CTE educational summit or meeting. (Yes or No)</b><br/>Yes</p>                    |   |
| <p><b>Primary Project Contact Name/Email/Phone:</b><br/>Danette Seboe, Principal CTE, <a href="mailto:danette.seboe@isd709.org">danette.seboe@isd709.org</a> 218-336-8700 x 2140</p> |   |
| <p><b>Teacher(s) Assigned to Externships Name/Email/Phone:</b><br/>Stacy Gizas / <a href="mailto:stacy.gizas@isd709.org">stacy.gizas@isd709.org</a> / 218-336-8830 x 3151</p>        |   |
| <p><b>Primary Project School:</b><br/>Denfeld High School</p>  |   |
| <p><b>Primary Partners (businesses or industries)</b><br/>OMC Smokehouse, Louis Hanson</p>   |   |

|  |   |
|--|---|
| <b>District Number :</b>   | ISD 709   |
| <b>Proposed Project Start Date:</b>  | Jun 23, 2025  |
| <b>Projected number of students impacted as a result of the Externship</b>               | 100   |
| <b>Project Grade Level(s) Impacted:</b>  | 9-12 grade  |
| <b>Describe the activities, goals, and intended outcomes/student impact:</b>             | The goal of this externship is for Chef Stacy Gizas to gain professional experiences and additional real-world skills in order to bring them to the Denfeld classroom, enhancing theoretical learning for Denfeld students. Chef Stacy is hoping to work with OMC specifically in the catering, product development, and cookbook development arenas of their business. The intended outcome of this project is |
| <b>Indicate if this externship was previously funded and the source of that funding.</b> | N/A   |
| <b>Hourly Rate and Total Requested Funding Amount:</b>                                   | \$30/hr x 80 hours<br>Total Funding Request: \$2,400  |

**Certification & Assurances**

I certify that the information in this application is true and correct to the best of my knowledge and belief and that I have the authority to apply for the requested award and in the amount requested.

*Simone Zunich*

Signature of Business Manager

**Simone Zunich**

Printed Name

**Executive Director Business Services**

Title

**3.18.25**

Date

*Danette Seboe*

Signature of Authorized Supervisor

**Danette Seboe**

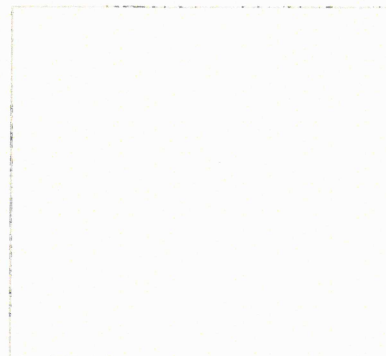
Printed Name

**Principal**

Title

**3.18.25**

Date



**Application & Reimbursement Request  
FY 2024 - 2025**

**Career & Technical Education Grant**

**Externships / Professional Development Request**

Basic Project Information and Externship Details

For Office Use: UFARS Code 305 Costs



Approximately \$25,000 will be available to fund Teacher Externship opportunities. The grant period is from April 2025 through June 2025 or until funding runs out.

**THE DEADLINE FOR APPLICATIONS IS APRIL 15, 2025**


GRANT APPROVAL COMMITTEE: NESC CTE Budget Committee:

APPROVAL COMMITTEE: NESC CTE Budget Committee:

The Rural CTE Grant will fund externship grants for between 80 and 200 hours. The hourly pay rate is typically \$30.00 / hour = 200 X \$30.00 = 6,000 plus 16% in benefits. Districts are limited to \$7,000 per academic year, and this may be reduced and equitably distributed to accommodate more requests. Externships must be submitted by May 30th. Externship grants are available only to licensed CTE instructors. Teachers must complete an Externship Application, which requires indicating their business partner. The Budget Committee will review applications and provide notice of approval.

**FOR REIMBURSEMENT EMAIL THIS REQUEST TO:**

*Kathy Jankila and John Engelking*

|   |   |
|---|---|
| <p>Name of the proposed CTE Externship Project or Projects.<br/>Duluth Aviation Externship</p>  |  |
| <p>If approved, please indicate the teacher's willingness to share their experience at a future CTE educational summit or meeting.      Yes</p>                               |   |
| <p>Primary Project Contact Name/Email/Phone:<br/>Danette Seboe, Principal CTE, <a href="mailto:danette.seboe@isd709.org">danette.seboe@isd709.org</a> 218-336-8700 x 2140</p> |   |
| <p>Teacher(s) Assigned to Externships Name/Email/Phone:<br/>Hamilton Smith / <a href="mailto:hamilton.smith@isd709.org">hamilton.smith@isd709.org</a> / 218-348-0237</p>      |   |
| <p>Primary Project School:<br/>The Area Learning Center / Academic Excellence Online for Duluth Public Schools</p>  |   |
| <p>Primary Partners (businesses or industries)<br/>Cirrus and/or Monaco Air</p>   |   |

|   |   |
|---|---|
| District Number :   | 709   |
| Proposed Project Start Date:  | 6/1/25  |
| Projected number of students impacted as a result of the Externship               | 50  |
| Project Grade Level(s) Impacted:  | 11 - 12   |
| Describe the activities, goals, and intended outcomes/student impact:             | Work directly with local Aviation Business to bring this knowledge to my Aerospace Physics and Intro to Aviation Classes. |
| Indicate if this externship was previously funded and the source of that funding. | This would be a new experience.   |
| Hourly Rate and Total Requested Funding Amount:                                   | Up to 80 hours x \$30/hour = \$2400 total request   |

**Certification & Assurances**

*I certify that the information in this application is true and correct to the best of my knowledge and belief and that I have the authority to apply for the requested award and in the amount requested.*

*Simone Zunich*

Signature of Business Manager  
**Simone Zunich**

Printed Name  
**Executive Director Business Services**

Title  
**3.18.25**

Date

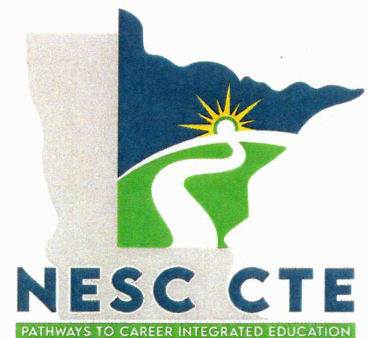
*Danette Seboe*

Signature of Authorized Supervisor  
**Danette Seboe**

Printed Name  
**Principal**

Title  
**3.18.25**

Date







**Draft  
Reimbursement Request  
FY 2024 - 2025**




**Career & Technical Education Grant  
Transportation / Fieldtrip Request**  
*Basic Project Information and Transportation Details*  
*For Office Use: UFARS Code 390 Transportation Costs*

Approximately 25 grants of \$400 each will be available, funding \$10,000 in student transportation opportunities. The grant period is from April 2024 to April 2025 or until funding runs out.

APPROVAL COMMITTEE: John Engelking, Scott Patrow, Tim Rohweder:

**FOR REIMBURSEMENT EMAIL THIS REQUEST TO:**  
*Kathy Jankila and John Engelking*

|   |   |  |
|---|---|--|
| <p>Name the proposed CTE project. Request the total miles, associated transportation costs, and rentals. (i.e., bus or van costs) (Average bus costs are \$1.40 per mile and \$30.00 per hour. (i.e., 200-mile round trip and 8 hours driver time = \$280 + 240 = \$520.00.</p> |   |  |
| <p>Lincoln Park Middle School FACS / AFNR Field Trip to Farm</p>  |   |  |
| <p>Primary Project Contact Name/Email/Phone:<br/>Sarah O'Connor, <a href="mailto:sarah.oconnor@isd709.org">sarah.oconnor@isd709.org</a>, 218-336-8880 ext 2025</p>  |   |  |
| <p>Primary Project School:<br/>Lincoln Park Middle School</p>   |   |  |
| <p>Primary Partners (Other schools, businesses, organizations, etc.)<br/>Eco3, Duluth Farm to School</p>  |   |  |
| District Number :   | 709   |  |
| Proposed Project Start Date:  | May 14-15, 2025   |  |
| Projected number of students to be served by June 30th, 2025:   | 55  |  |
| Project Grade Level(s):   | 8   |  |
| Describe the proposed CTE project, including key activities, goals, and intended outcomes/student impact:   | In line with MN FACS standard 3.1: knowledge of local food and how food grows, we would like to take students to the Eco3 farm at LSC to assist with planting |  |
| (Limit of \$400) Total Requested Funding Amount:  | \$400   |  |

**Certification & Assurances**

I certify that the information contained in this application is true and correct to the best of my knowledge and belief and that I have the authority to apply for the award requested and in the amount requested.

*Simone Zurich*

\_\_\_\_\_  
Signature of Business Manager

\_\_\_\_\_  
Simone Zurich

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Director of Business Services

\_\_\_\_\_  
Title

\_\_\_\_\_  
3.20.25

\_\_\_\_\_  
Date

*Danette Seboe*

\_\_\_\_\_  
Signature of Authorized Supervisor

\_\_\_\_\_  
Danette Seboe

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Principal

\_\_\_\_\_  
Title

\_\_\_\_\_  
3.20.25

\_\_\_\_\_  
Date



## AGREEMENT FOR FACILITIES USE

This Agreement is entered into on this 20th day of March, 2025 by and between Independent School District No. 709, Duluth (the "District") and Midwest Special Instruments ("MSI") (collectively, "Parties").

WHEREAS, the District owns the property located at 709 Portia Johnson Drive, Duluth, MN 55811 ("District Office"); and

WHEREAS, the District Office contains numerous conference rooms, including one identified as DSC Closed Boardroom Room 120 (the "Conference Room"); and

WHEREAS, MSI wishes to use the Conference Room from March 31, 2025 through April 4, 2025 for purposes of hosting a School Equipment Calibrations event.

NOW, THEREFORE, IN CONSIDERATION OF the mutual promises contained in this Agreement and for other valuable consideration, the sufficiency of which is acknowledged, the parties agree as follows:

1. **Term.** This Agreement will take effect on Monday, March 31, 2025 at 8 a.m. and expire on Friday, April 4, 2025 at 4:30 p.m. (the "Term").
2. **Right to use the Conference Room.** MSI shall have the exclusive right to use the Conference Room from 8 a.m. to 4:30 p.m. during each day of the Term. MSI shall have complete and sole responsibility for any costs, damages, or losses which arise out of transporting, using, testing, maintaining, and operating any electronic equipment brought by MSI to the District Office and Conference Room, including but not limited to any of its own equipment or equipment owned by others that MSI is calibrating.
3. **Payment.** The Parties agree that MSI is using the Conference Room to do calibrations of electronic equipment for school districts, including the District. The Parties therefore agree that based on the terms of this Agreement and the calibration services provided by MSI to the District, no further consideration will be required for use of the Conference Room.
4. **Expiration of Term.** By no later than 4:30 p.m. on Friday, April 4, 2025, MSI shall completely vacate the Conference Room. MSI shall leave no equipment, waste, or other materials in the Conference Room.
5. **Cleaning.** During the Term, MSI is responsible for cleaning the Conference Room. The District is responsible for cleaning all other portions of the District Office consistent with the District's cleaning schedule, which it may determine at its sole and absolute discretion.
6. **Use of other Portions of the District Office.** MSI shall be allowed to use the shared bathrooms and hallway area outside of the Conference Room. MSI shall not have access to other portions of the District Office.
7. **Indemnification.** In consideration of being allowed to use the Conference Room, MSI hereby agrees to defend, indemnify, and hold the District harmless from any claims, demands, losses, or injuries (collectively "claims") to persons or property which arise

from or in connection with the use of the District Office and/or Conference Room, which claims shall include, without limitation: loss, injury, or death to any licensee, invitee, agent, or guest of the User, and any costs, damages, or liability relating to equipment brought to the District Office and Conference Room by MSI.

8. **Termination.** This Agreement may be terminated by either party at any time for cause. "Cause" is defined as a material breach of either party's obligations under this Agreement or the inability of a party to continue to perform its obligations under the Agreement.
9. **Choice of Law and Severability.** This Agreement is governed by the laws of the State of Minnesota. If any part of this Agreement is construed by a court to be unenforceable or in violation of any applicable law, the remaining portions of the Agreement will remain in full force and effect.
10. **Waiver and Equal Drafting.** Waiver by either party of any term or condition of this Agreement will not constitute a waiver of any other term or condition of this Agreement. If either party asserts that a provision of this Agreement is ambiguous, the Agreement must be construed to have been drafted equally by the parties.
11. **Entire Agreement.** This Agreement constitutes the entire agreement between the parties. Neither party has relied on any statements, promises, or representations that are not stated in this document. The terms of this Agreement are contractual and supersede any and all prior agreements between the parties. No waiver or modification of any provision of this Agreement will be valid unless it is in writing and signed by both parties.
12. **Headings.** Headings used in this Agreement are provided for convenience only and shall not be used to construe meaning or intent.

IN WITNESS WHEREOF, the parties have entered into this Agreement on the dates recorded by their signatures.

**MIDWEST SPECIAL INSTRUMENTS**

Anthony P. Grundiner  
By: ANTHONY GRUNDINER  
Its: CONTROLLER

3-24-2025  
Date

**INDEPENDENT SCHOOL DISTRICT NO. 709, DULUTH**

Simone Zurch  
By: Simone Zurch  
Its: Exec. Dir. Business Services

3-24-2025  
Date



# WOLF RIDGE<sup>SM</sup>

## ENVIRONMENTAL LEARNING CENTER

### Program Contract

### School Groups

|   |   |
|---|---|
| <b>Paul Davis</b>   | paul.davis@isd709.org   |
| Lester Park School<br>5300 Glenwood Street, Duluth MN 55804 | Is the Coordinator's name correct? If not, please correct below:<br>New Coordinator name:<br>Email Address: |

**Deposit:** You have made a reservation to stay for September 24, 2025 - September 26, 2025 with 125 participants. To hold your reservation we require a deposit of \$1,875.00. **This contract is valid for 30 days after receipt.**

**Cancellation Policy:** Cancellations require 60 days' notice prior to your scheduled arrival date to receive a full deposit refund. *\*Notify us immediately if you need to cancel this reservation.*

By signing below, I agree to the terms listed above:

|   |  |             |
|---|--|-------------|
| <b>Printed Name:</b> <i>Simone Zunic</i>                                  | <b>Title:</b> <i>Exec. Dir. Business Services</i>                            |             |
| <b>Signed Name:</b> <i>Simone Zunic</i>                                   | <b>Date:</b> <i>3-25-25</i>  |             |
| <b>Billing Contact:</b> <i>Tracy Thompson</i>                             | <b>Billing Address:</b>  |             |
| <b>Billing email address:</b> <i>tracy.thompson@isd709.org</i>            | <i>709 Portia Johnson Drive<br/>Duluth MN 55811</i>                          |             |
| <b>Cardholders Name:</b> <input type="checkbox"/> same as billing contact | <b>Cardholders address:</b> <input type="checkbox"/> same as billing address |             |
| <b>Credit Card #</b>  | <b>Exp Date:</b>   | <b>CVV:</b> |
| <b>If unable to pay at this time, when can we expect your deposit?</b>    |  |             |

**Return to: 6282 Cranberry Rd - Finland, MN 55603 or fax to: 218-353-7762**

**Today's Date: March 24, 2025**