

Opportunity Title:	Office of Innovation and Improvement (OII): Investing i
Offering Agency:	U.S. Department of Education
CFDA Number:	84.411
CFDA Description:	Investing in Innovation (i3) Fund
Opportunity Number:	ED-GRANTS-032712-001
Competition ID:	84-411A2012-1
Opportunity Open Date:	03/27/2012
Opportunity Close Date:	05/29/2012
Agency Contact:	Carol Lyons i3 Director E-mail: i3@ed.gov Phone: 202-453-7122

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name:

Mandatory Documents

Move Form to Complete

Move Form to Delete

Mandatory Documents for Submission

ED GEPA427 Form

Dept of Education Supplemental Information for ED Abstract Form

Project Narrative Attachment Form

Budget Narrative Attachment Form

Other Attachments Form

Optional Documents

Move Form to Submission List

Move Form to Delete

Optional Documents for Submission

Instructions

- 1** Enter a name for the application in the Application Filing Name field.

 - This application can be completed in its entirety offline; however, you will need to login to the Grants.gov website during the submission process.
 - You can save your application at any time by clicking the "Save" button at the top of your screen.
 - The "Save & Submit" button will not be functional until all required data fields in the application are completed and you clicked on the "Check Package for Errors" button and confirmed all data required data fields are completed.

- 2** Open and complete all of the documents listed in the "Mandatory Documents" box. Complete the SF-424 form first.

 - It is recommended that the SF-424 form be the first form completed for the application package. Data entered on the SF-424 will populate data fields in other mandatory and optional forms and the user cannot enter data in these fields.
 - The forms listed in the "Mandatory Documents" box and "Optional Documents" may be predefined forms, such as SF-424, forms where a document needs to be attached, such as the Project Narrative or a combination of both. "Mandatory Documents" are required for this application. "Optional Documents" can be used to provide additional support for this application or may be required for specific types of grant activity. Reference the application package instructions for more information regarding "Optional Documents"
 - To open and complete a form, simply click on the form's name to select the item and then click on the => button. This will move the document to the appropriate "Documents for Submission" box and the form will be automatically added to your application package. To view the form, scroll down the screen or select the form name and click on the "Open Form" button to begin completing the required data fields. To remove a form/document from the "Documents for Submission" box, click the document name to select it, and then click the <= button. This will return the form/document to the "Mandatory Documents" or "Optional Documents" box.
 - All documents listed in the "Mandatory Documents" box must be moved to the "Mandatory Documents for Submission" box. When you open a required form, the fields which must be completed are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message.

- 3** Click the "Save & Submit" button to submit your application to Grants.gov.

 - Once you have properly completed all required documents and attached any required or optional documentation, save the completed application by clicking on the "Save" button
 - Click on the "Check Package for Errors" button to ensure that you have completed all required data fields. Correct any errors or if none are found, save the application package.
 - The "Save & Submit" button will become active; click on the "Save & Submit" button to begin the application submission process.
 - You will be taken to the applicant login page to enter your Grants.gov username and password. Follow all onscreen instructions for submission.

Application for Federal Assistance SF-424		
* 1 Type of Submission. <input checked="" type="checkbox"/> Preapplication <input type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	* 2 Type of Application: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision	* If Revision, select appropriate letter(s): _____ * Other (Specify): _____
* 3. Date Received. 04/09/2012	4. Applicant Identifier. _____	
5a. Federal Entity Identifier: _____	5b. Federal Award Identifier. _____	
State Use Only:		
6. Date Received by State. _____	7. State Application Identifier _____	
8. APPLICANT INFORMATION:		
* a Legal Name. Independent School District 709 Duluth Public Schools		
* b Employer/Taxpayer Identification Number (EIN/TIN): 416003776	* c. Organizational DUNS 0715010920000	
d. Address:		
* Street1 215 North First Ave East	Street2: _____	
* City: Duluth	County/Parish: St. Louis	
* State. MN: Minnesota	Province: _____	
* Country: USA: UNITED STATES	* Zip / Postal Code: 558022058	
e. Organizational Unit:		
Department Name: _____	Division Name: _____	
f. Name and contact information of person to be contacted on matters involving this application:		
Prefix: _____	* First Name: William	
Middle Name: _____	* Last Name: Gronseth	
Suffix: _____	Title: Superintendent	
Organizational Affiliation: Duluth Public Schools		
* Telephone Number: 2183368752	Fax Number: 2183368773	
* Email: william.gronseth@duluth.k12.mn.us		

Application for Federal Assistance SF-424

* 9. Type of Applicant 1: Select Applicant Type:

G: Independent School District

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

* 10. Name of Federal Agency:

U.S. Department of Education

11. Catalog of Federal Domestic Assistance Number:

84.411

CFDA Title:

Investing in Innovation (I3) Fund

* 12. Funding Opportunity Number:

ED-GRANTS-032712-001

* Title:

Office of Innovation and Improvement (OII): Investing in Innovation Fund (I3) Scale-Up Grants CFDA Number 84.411A

13. Competition Identification Number:

84-411A2012-1

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment

Delete Attachment

View Attachment

* 15. Descriptive Title of Applicant's Project:

Duluth Family Liaison Model

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

Application for Federal Assistance SF-424

16. Congressional Districts Of:

* a. Applicant

b Program/Project

Attach an additional list of Program/Project Congressional Districts if needed

17. Proposed Project:

* a. Start Date:

* b. End Date:

18. Estimated Funding (\$):

* a. Federal	<input type="text" value="2,997,831.00"/>
* b. Applicant	<input type="text" value="2,432,416.00"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="0.00"/>
* e. Other	<input type="text" value="0.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="5,430,247.00"/>

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- a. This application was made available to the State under the Executive Order 12372 Process for review on
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**

- Yes
- No

If "Yes", provide explanation and attach

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: * First Name:
Middle Name:
* Last Name:
Suffix:

* Title:

* Telephone Number: Fax Number:

* Email:

* Signature of Authorized Representative: * Date Signed:

**Office of Innovation and Improvement
i3 Applicant Information Sheet
FY 2012**

Instructions: Eligible applicants must complete and submit this information sheet with each application submitted. Completing this sheet will assist ED staff in assessing the needs of the i3 competition and provide staff with a better sense of the applicant pool. Applicants must fill out this form electronically, "Save As" a .PDF, and upload the generated .PDF into Appendix A on Grants.gov.

PLEASE NOTE: Information included in this form may be made broadly and publicly available. Applicants should not include proprietary information.

Applicant Info

Lead Applicant Name: Independent School District 709 Duluth Public Schools

Lead Applicant City: Duluth

Lead Applicant State: MN

Eligible Applicant Type:

LEA

Project Info

Project Title: Duluth Family Liaison Model

Length of Requested Grant Award:

5 Years

Total Federal Funding Requested: \$2,997,831

Select the ONE Absolute Priority (AP) that you are addressing in your application.

AP3: Improving Parent and Family Engagement

Project Description:

In 1200 characters or less, please provide a brief description of the project you wish to propose. Be sure to include a summary of project objectives and expected outcomes.

The Duluth Family Liaison Model will serve 1478 high-needs, high-poverty students at 5 high-poverty schools in Duluth MN. Significant academic improvement for high-needs students at Grant/Nettlelton, a high poverty school (84.4% FRL), justifies expanding the Family Liaison Model to four additional schools with high rates of FRL.

Hypothesis: The family liaison as an integral part of a community school model will increase school achievement and student growth for high need students living in poverty.

Goal (1) Identify, document and expand innovative practices that can be shared and taken to scale.

Objective 2: Develop, expand, and take to scale the Family Liaison Model best practices.

Objective 1: Identify and document the Family Liaison Model best practices.

Goal (2) Support partnerships between Duluth Public Schools and the local non-profits and agencies that provide services.