

**Annual State Application under Part B of the Individuals with Disabilities Education Act
As Amended in 2004
Instruction Sheet**

Section I

A. Submission Statement for Part B in IDEA

When completing this section:

- Select and check the appropriate submission statement(s) the State is using for this Federal Fiscal Year (FFY). The third statement is optional and should only be checked if the State chooses to submit policies and procedures to OSEP for review under one or more of the conditions specified in the statement. States are not required to submit policies and procedures to OSEP for review and approval. Possible combinations of 'checked' statements are as follows: 1; 2; 1 and 3; or 2 and 3.

B. Conditional Approval for FFY _____ Grant Year

Section I.B is to be completed only if the State received **conditional approval** for the FFY _____ grant year.

When completing this section:

- Check the appropriate statement(s) found in subsection 1 and/or 2.

Section II

A. Assurances Related to Policies and Procedures

When completing this section:

- Read each assurance (1-25).¹
- Enter, in the cells found to the left of the assurance, either a check in the cell found in the 'yes' column or a date in the cell found in the 'no' column. The date in the 'no' column is the date on which the State will complete changes in order to provide the assurance. At least one cell must be completed beside each assurance.

B. Other Assurances

When completing this section:

- Read each assurance and place a check in the cells labeled 'yes'.

C. Certifications

When completing this section:

- Read each certification statement and place a check in the cells labeled 'yes'.

D. Statement

To complete the assurance and certification statement:

- Enter the name of the State and official name of the State Agency in the appropriate blanks.
- Print the name and title of the authorized representative of the State.
- Sign the signature block.
- Enter the date the assurance and certification statement was signed.

Section III

Description of Use of Funds Under Part B of the Individuals with Disabilities Education Act – 20 U.S.C. 1411(e)(5)

When completing this section use the **Excel Interactive Spreadsheet**²:

¹ An *Optional Technical Assistance Checklist – Application Requirements found in PL 108-446* is found at <http://www.ed.gov/fund/grant/apply/osep/2006apps.html>. This checklist is provided to assist States in the completion of OMB Information Collection 1820-0030.

² The Excel Interactive Spreadsheet contains State specific worksheets that automatically calculate which allows a State to determine if amounts entered on the electronic worksheet (Use of Funds Form) are correct. The 2007 Excel Interactive Spreadsheet will be sent electronically to each State when the 2007 Applications are issued.

- Select the State Worksheet (See individual State tabs at the bottom of the Excel Spreadsheet.)
- Enter, in the appropriate cells, the dollar amount that the State is spending that is being allocated for the activity specified in the column to the left.
- The dollar amounts entered in the cells, for administration and for other State activities should add up to less or equal to the dollar amount provided to the State by the Department for each of these activities.
- Describe, in Section III of the paper copy, the process used to get input from LEAs regarding the distribution of amounts among activities to meet State priorities.
- **The Excel Interactive Spreadsheet must be submitted as part of the State's application.**

Section IV

State Administration

States must attach to this application a list identifying any rule, regulation, or policy that is State-imposed (not required by IDEA or Federal regulations). If there are no such State-imposed rules, regulations, or policies, please so indicate. In addition, the State is required to inform local education agencies in writing of such State-imposed rules, regulation or policy.