

Application to Participate in the Leveraging Educational Assistance Partnership (LEAP) and Special Leveraging Educational Assistance Partnership (SLEAP) Programs

Award Year 2007-2008



O.M.B. No 1845-0028
Expiration Date: 04/30/2007



1. State:

2. Data Universal Numbering Scheme (DUNS):

3. State agency's name and mailing address:

a) Name

b) No. Street

c) City, Zip

4. LEAP and SLEAP Program contact(s):

a) Agency Director

b) Primary Pogram(s) Contact

c) Fiscal Contact

5. Contact(s) E-mail address(es):

a) Agency Director

b) Primary Pogram(s) Contact

c) Fiscal Contact

6. Contact(s) phone number(s):

a) Agency Director

b) Primary Pogram(s) Contact

c) Fiscal Contact

7. Contact(s) fax number:

Primary Contact's FAX No.

Section B: State Request for Federal Funds (Section 415C(a))

8. Total federal funds requested under LEAP for student awards (include the basic state allotment plus any available reallocated funds):

LEAP \$

9. Does your state also choose to participate in SLEAP? YES NO

If yes, total federal funds requested under SLEAP for student awards (include the basic state allotment plus any available reallocated funds):

SLEAP \$

Section C: State Matching Funds Available (Sections 415C(b)(6)&(10) and 415E(e)&(f))

For the year for which funds are requested, indicate the expected amount of:

10. (a) Total state-appropriated funds available for need-based awards:	\$	<input type="text"/>
(b) All other state funds available for need-based awards:	\$	<input type="text"/>
(c) Total state funds available for non-need based awards:	\$	<input type="text"/>
TOTAL	\$	<input type="text"/>

\$0.00

Section D: LEAP State Maintenance-of-Effort (MOE) (Section 415C(b)(8))

11. Total LEAP expenditures (not including federal funds) for previous three (3) award years:

Expenditures - Previous Three (3) Award Years:

(a) 2003-2004: \$ (b) 2004-2005: \$ (c) 2005-2006: \$

12. Projected LEAP expenditures for award year 2006-2007:

\$

13. Projected LEAP expenditures for award year 2007-2008:

\$

14. If item 13 is more than the item 11 average, check here to item 17. If item 13 is less than the average for item 11, show full-time equivalent enrollment as a basis for calculating average annual expenditures per full-time equivalent student.

Full-time Equivalent (FTE) Students - Previous Three (3) Award Years:

(a) 2003-2004: (b) 2004-2005: (c) 2005-2006:

15. Projected FTEs for award year 2006-2007:

16. Projected FTEs for award year 2007-2008:

Section E: State Determination of Substantial Financial Need of Students (Section 415C(b)(4))

17. (a) Does your state use the "Free Application for Federal Student Aid (FAFSA)" or "Renewal FAFSA" for students to apply for state grant and work-study aid in your state? YES NO

(b) If your state uses any application forms in addition to the FAFSA or Renewal FAFSA, or if your answer to 17(a) was "No," provide a copy of each form used by the state. Include each form's instructions, including any instructions concerning the payment of fees by students for processing application forms.

(c) Does your state use the Federal Need Analysis Methodology to determine financial need for your LEAP and SLEAP programs? Y NO

(d) If your answer to 17(c) was "No," provide a detailed description of the methodology used by your state including all of the descriptive materials produced by your state or other entity to explain your state's methodology.

(e) Does your state use in its need analysis methodology the definition of "independent student" in section 480(d) of the Higher Education Act of 1965, as amended (HEA) (P.L. 102-325)? YES NO

(f) If your answer to 17(e) was "No," you must provide a detailed explanation as to why the Secretary should approve a definition of "independent student" that varies from that term as defined in section 480(d) of the HEA. Also, you must provide a detailed description of your state's "independent student" definition used in your LEAP and SLEAP programs.

18. Provide a description of the criteria (standards) used by your state to determine whether a student's financial need is substantial. Clearly relate these criteria (standards) to the need analysis methodology used by your state. Also, include any state policies with respect to packaging LEAP and/or SLEAP awards with other assistance and preventing overawards. *Please provide our office with updated materials.*

Section F : Institutional Eligibility Within State

19. Please indicate each type of postsecondary educational institution that students may attend in 2007-2008 as recipients of assistance under the LEAP and SLEAP program(s):

- (a) Public 2-year (c) Private 2-year (e) Other Nonprofit Institutions
(b) Public 4-year (d) Private 4-year (f) Private Proprietary (for profit)

20. If 19(a), (b), (c), (d), or (e) were left blank, please indicate the reason and type of institution(s) for which the reason applies:

- (a) State Constitution
(b) State Law enacted before October 1, 1978
(c) Type of institution does not exist in my State

Section G : State Program Names and Maximums

21. Name of state program(s)

(a) included in your LEAP Program:

(b) included in your SLEAP Program:

22. Maximum award amount(s) for the program(s) listed in Item

(a) LEAP Program:

(b) SLEAP Program:

Section H: SLEAP Specific Information

If State is also participating in SLEAP, please complete Section H.

SLEAP Base Year Special Rule (Section 415E(f))

23. Total state expenditures for need-based grants, scholarships, and work-study assistance for the 1999-2000 Award Year:

\$

SLEAP State Maintenance-of-Effort (MOE) (Section 415E(d))

24. Total state expenditures for SLEAP authorized activities for the following award years:

a) 2005-2006 final award year expenditures:

\$

b) 2006-2007 projected award year expenditures:

\$

25. If Item 24(b) is equal to or higher than Item 24(a), check here to item 26. If item 24(b) is less than item 24(a), show the number of students who received assistance under the SLEAP authorized activities for the following award years:

(a) 2005-2006 final award year

award year

SLEAP Activities (Section 415E(c))

26. Please indicate each activity your state plans to fund using its SLEAP allotment for the 2007-2008 award year.

Please check all that apply.

- a) LEAP Grant Awards Supplement
 b) LEAP Community Service Work-Study Awards Supplement
 c) Merit and Academic Achievement, or Critical Careers Scholarships

Section I: Assurances and Signature

The state agency designated in Section A hereby assures the U.S. Secretary of Education that it will comply with all provisions of the laws and regulations applicable to the Leveraging Educational Assistance Partnership (LEAP) and Special Leveraging Educational Assistance Partnership (SLEAP) program(s) including the following assurances:

That it is the "single state agency" designated to administer the LEAP and SLEAP programs as required by section 415 of the Higher Education Act of 1965, as amended (HEA).

That LEAP assistance to a full-time student will not be more than \$5,000 per academic year.

That the state will use no more than 20 percent of its allotment for each fiscal year for payments to eligible students for community service-learning jobs as defined in 34 CFR 692.30(d).

That no student or parent shall be required by the state or any institution participating in the state's LEAP or SLEAP programs to pay a fee payable to an entity other than the state for the collection of any data needed to make a determination of a student's eligibility under the state's LEAP and SLEAP programs regardless of whether that data may be used for institutional purposes.

That LEAP and SLEAP recipients are selected on the basis of substantial financial need, determined annually according to criteria established by the state and approved by the Secretary.

That all public and nonprofit institutions of higher education in the state are eligible to participate in the state LEAP and SLEAP programs, unless such participation is prohibited by the state's constitution or by state law enacted before October 1, 1978.

That the non-federal portion of expenditures for LEAP grants and work-study jobs under this program will be from funds supplied by the state from direct state appropriations as required under section 415C(b)(6), (b)(8), and (b)(10) of the HEA.

That if a state's allocation of LEAP and SLEAP funds is based in part on the financial need demonstrated by independent students as defined in section 480(d) of the HEA or students attending less-than-full-time, a reasonable proportion of the LEAP and SLEAP funds will be made available to these students.

That to the extent practicable, state LEAP and SLEAP program funds shall represent the same proportional distribution of the funds awarded to independent students in the LEAP and SLEAP programs as to the funds awarded to all students in the state program or programs of which the state's LEAP and SLEAP programs are a part.

That no payment will be made to a student, either directly by the state or indirectly through an institution of higher education under the LEAP and SLEAP programs, unless the student meets the eligibility requirements of the program regulations (34 CFR 692.40).

That the state will maintain fiscal control and fund accounting procedures that provide for such reports as may be reasonably necessary to enable the Secretary to perform the Secretary's functions under the LEAP and SLEAP programs.

That the state will provide for annual, independent, non-federal audits of its LEAP and SLEAP programs operations as required by section 7501(8) (A) of the Single Audit Act of 1984 (31 USC).

If your state participates in the SLEAP Program, the state agency further assures the U.S. Secretary of Education of the following:

That the SLEAP funds will only be used for the authorized activities described under section 415E(c) of the HEA.

That for purposes of determining the state's share of the cost of authorized SLEAP activities, the state will consider only those expenditures from non-federal sources that exceed its total expenditures for need-based grants, scholarships, and work-study assistance for award year 1999-2000 (including any assistance provided under LEAP).

That the total amount spent per student OR the total amount of funds spent by the state, from non-federal sources, for the authorized activities described under section 415E(c) of the HEA for the preceding award year was not less than the amount spent per student OR the total amount of funds spent by the state for the SLEAP activities for the second preceding award year.

That the federal share of the total cost of the authorized activities under the SLEAP Program for any fiscal year shall not be more than 33 1/3 percent and the remaining share of the total cost of the state's SLEAP Program are matching dollars derived from non-federal sources.

THE STATE AGENCY CERTIFIES THAT THE INFORMATION IN THIS APPLICATION IS TRUE AND ACCURATE AND IS BASED UPON INFORMATION REFLECTED IN THE OFFICIAL ACCOUNTING AND PROGRAM RECORDS OF THIS AGENCY, AND UPON REQUEST, SUCH RECORDS WILL BE MADE AVAILABLE TO THE SECRETARY OR HIS DELEGATE FOR REVIEW.

Typed Name/Title of Chief Executive Officer

Signature of the Chief Executive Officer of Applicant State Agency

Date

<i>CONTACT INFO</i>	0	0	0	0	0	0
<i>Request and Matching Info</i>	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<i>LEAP MOE Information</i>	0	0	0	0	0	0
<i>Sections F and G</i>	0	0	0	0	0	0
<i>SLEAP Specific</i>	0	\$0	0	0	0	0

0	0	0	0	0	0	-	-
\$0.00							
0	0	0	0	0			
0	0	\$0.00	\$0.00	\$0.00	\$0.00		
0							

