

# Office of Innovation and Improvement

## Investing in Innovation Fund Eligible Applicant Supplemental Sheet

### FY 2010

**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.

**Who is the Eligible Applicant?**  LEA     Nonprofit w/ LEA     Nonprofit w/ consortium of schools

**Are you the lead applicant on this grant?**  Yes     No

**Have you applied for more than one i3 grant?**  Yes     No

**Project Title:**

**Actual Project Location:**            **City**            **State**

**City**            **State**

**City**            **State**

**Type of Grant Requested:**     Scale-up     Validation     Development

**Length of Requested Grant Award:**     3 years     4 years     5 years

Select the **ONE Absolute Priority** that you are addressing in your application.

**Absolute Priority 1:**

Innovations that Support Effective Teachers and Principals.

**Absolute Priority 2:**

Innovations that Improve the Use of Data.

**Absolute Priority 3:**

Innovations that Complement the Implementation of High Standards and High-Quality Assessments.

**Absolute Priority 4:**

Innovations that Turn Around Persistently Low-Performing Schools.

Select **ALL Competitive Preference Priorities (CPP)** that you are addressing in your application.

CPPs are optional and you may address one or more.

**CPP 5:** Innovations for Improving Early Learning Outcomes.

**CPP 6:** Innovations that Support College Access and Success.

**CPP 7:** Innovations to address the Unique Learning Needs of Students with Disabilities and Limited English Proficient Students.

**CPP 8:** Innovations that Serve Schools in Rural LEAs.

**Project Description:**

In 1000 characters, please provide a brief description of the project you wish to propose.

Please type your project description here...

**Project Partners:**

Please list all organizations partnering with this project and the amount of Federal funds requested for each as part of your overall budget.

Partner Name	Budget Amount	Partner Type
1.	\$	<input type="checkbox"/> Official <input type="checkbox"/> Other
2.	\$	<input type="checkbox"/> Official <input type="checkbox"/> Other
3.	\$	<input type="checkbox"/> Official <input type="checkbox"/> Other
4.	\$	<input type="checkbox"/> Official <input type="checkbox"/> Other

**Private Sector Matching Requirement**

Have you secured the 20% private sector match?     YES     NO

If YES, list the organization(s) that are providing the matching funds.

Are you requesting a waiver for the 20% private sector match?     YES     NO

If, YES, please attach the necessary justification under the Appendix Narrative Attachments at the time of submission.

## Open Innovation Web Portal

The Open Innovation Web portal is an online tool that provides an opportunity for i3 applicants to further develop their ideas, identify potential partners, and secure matching funds. Applicants to the i3 Fund will not receive additional points or gain any formal advantage over those applicants who do not post their ideas and related information on the portal. The portal is operated in partnership with an outside organization. If you are interested in learning more about the Open Innovation Web Portal, please visit [innovation.ed.gov](http://innovation.ed.gov).

**Would you like your information to be transferred to the Open Innovation Web Portal?**  YES  NO