



FY2020 E-Rate State Matching Grant Technical Assistance Webinar

Illinois State Board of Education
April 16, 2020



Agenda

- Welcome and Introductions
- NOFO/RFP Overview
- Eligibility
- The Application Process
- District's Next Steps
- Helpful Resources
- Where to Direct Questions



Welcome and Introductions

- Presenter:
 - Erich Grauke
Principal Consultant
Curriculum and Instruction Department
ISBE



NOFO/RFP Overview

- Notice of Funding Opportunity (NOFO)/Request for Proposal (RFP) information found at www.isbe.net/broadband under the E-Rate State Matching Grant Tab
- NOFO/RFP released on Wed. March 18, 2020
- Proposals due to ISBE office in Springfield by 4:00 p.m. on Friday, May 1, 2020
- Due to COVID-19 closures, it is **STRONGLY** advised to send applications via secure file tool on ISBE website.



NOFO/RFP Overview

- ISBE received up to \$16.3 million in FY2019 to help districts cover the non-discounted portion of special construction costs.
- Special construction projects are the upfront, non-recurring costs of deploying new fiber or upgraded fiber to E-Rate eligible entities
 - Construction of network facilities
 - Design and engineering
 - Project management



Eligible Applicants

- Any Illinois Public School District who:
 - File a FCC Form 470 with RFP indicating fiber internet is desired
 - Districts who check “state match/tribal funding” indicator on FCC Form 471
 - DoIT Consortium Members – verify that this was done for your district with DoIT on the Consortium 471 Filing
 - Priority is given to districts without scalable fiber connectivity
 - Applications for districts wishing to improve WAN connections or reducing costs will also be considered
 - USAC E-Rate approval is required for grant disbursement



DoIT Consortium Membership

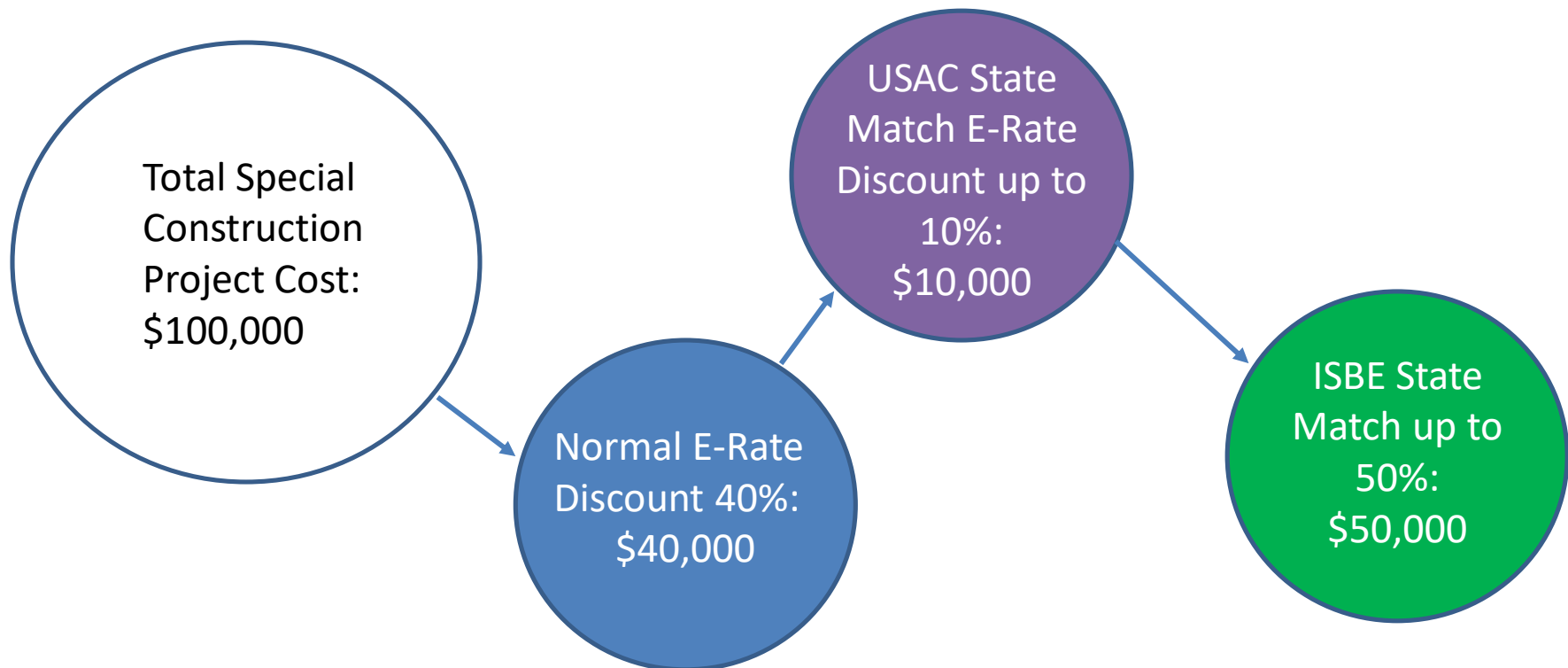
- Membership in the DoIT E-Rate Consortium is not required to be eligible for this grant





How the State Match Works

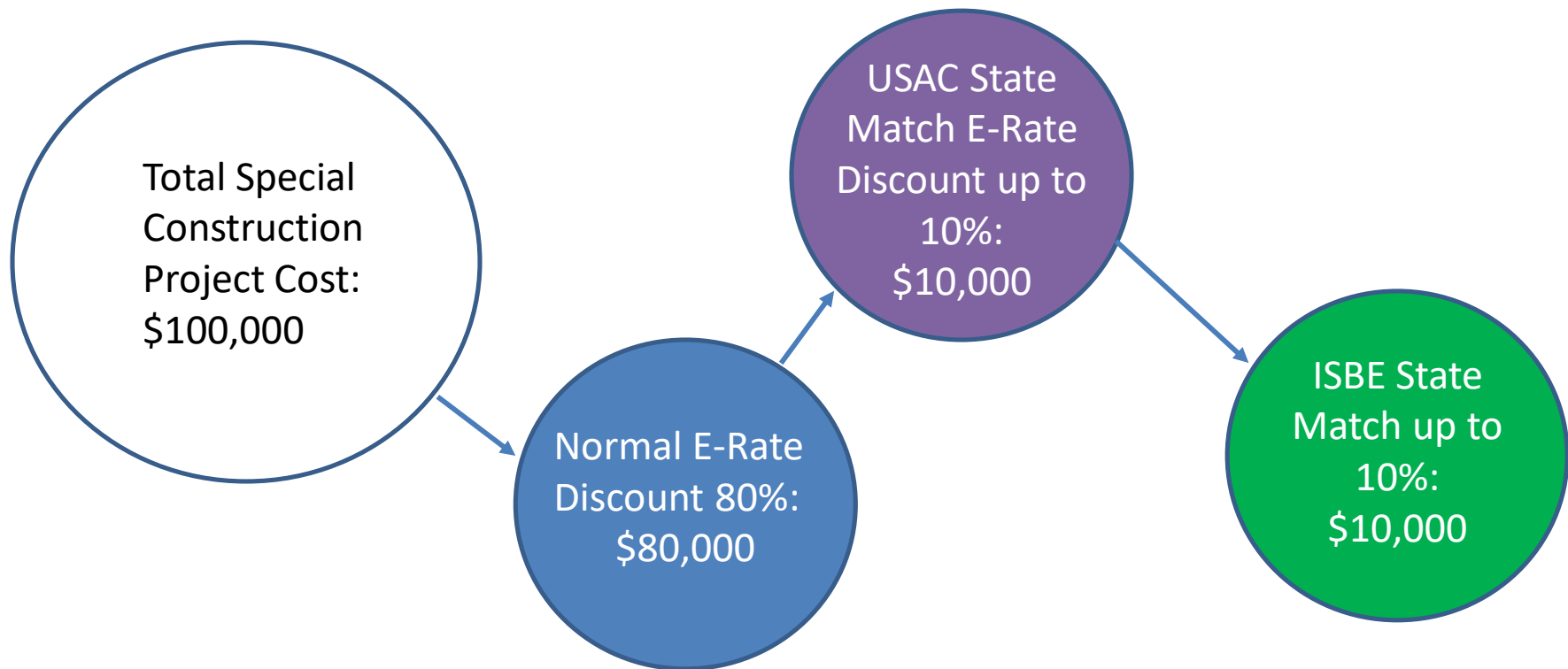
- ABC School District, with a 40% Category 1 Discount Rate applies for State Match Grant:





How the State Match Works

- XYZ School District, with an 80% Category 1 Discount Rate applies for State Match Grant:





The Grant Application Process

- Applicants file FCC Form 470 requesting fiber special construction
 - Must wait a minimum of 28 days before selecting vendor per USAC rules
 - Due to this, a Form 470 must have been filed with USAC by April 1, 2020 as Form 471 deadline is April 29, 2020
 - RFP is strongly recommended for all types of special construction
 - Make sure that both 470 and RFP describes the desired products and services you need with sufficient specificity for providers to be able to submit responsive bids
 - Requested services on 470 and RFP **MUST MATCH!**



The Grant Application Process

- If interested in self provisioned or dark fiber, you must also seek bids for leased lit fiber, compare all 3 types received and choose the most cost-effective option
- Education Superhighway has RFP templates and evaluation support at <https://www.educationsuperhighway.org/resources/>



The Grant Application Process

- Important to file 470 and wait 28 days
 - Last day to file 470 and meet USAC 28 day window was Wednesday, April 1, 2020



The Grant Application Process

- Fill out the Grant Application
 - Include form 470, evaluation rubric of vendors, and the name of your selected vendor along with their proposal
 - Upon approval from ISBE and USAC approval of your 470/471 request, state will match the non-discounted portion of project subject to funding availability



The Application

[Home](#) > [Innovation and Ideas](#) > [Educational Technology](#) > [Broadband Information](#)

INNOVATION AND IDEAS Educational Technology

Broadband Information

- [Welcome to the Illinois Classroom Connectivity Initiative](#)

RESOURCES

- [American Association School Superintendent's E-rate Toolkit](#)
- [E-rate Central](#)
- [Illinois Century Network](#)
- [Illinois State Library's E-rate Information](#)
- [National Center for Education Statistics](#)
- [2019 SETDA updated broadband report: State K-12 Broadband Leadership: Driving Connectivity and Access](#)
- [USAC Trainings and Outreach](#)

INNOVATION & IDEAS

BROADBAND INFORMATION

As the State Educational Technology Directors Association (SETDA) has stated in their latest broadband access release, the internet is no longer an afterthought for K-12 education. High speed broadband and Wi-Fi access is a vital component to the classroom.

The following resources can help districts reach their broadband and Wi-Fi access goals.

E-Rate

E-Rate Timetable

E-Rate Modernization Order

E-Rate-Links and Additional Information

Discount Calculation / Program Integrity Assurance (PIA) Third Party Verification

Illinois Classroom Connectivity Initiative

Connect Illinois and the Illinois K-12 Broadband Initiative

E-rate State Matching Grant

2020

- [FY 2020 E-Rate State Matching Grant](#)
 - [FY 2020 E-Rate State Matching Grant RFP](#)
 - [04-01 E-Rate State Match Grant Form](#)
 - [RFP Technical Assistance Webinar](#)

www.isbe.net/broadband



Attachment 1

- Uniform Application for State Grant Assistance

Use your "Mouse" or "Tab" key to move through the fields and check boxes. After completing last field, save document to hard drive to make future updates or click print button.

Uniform Application for State Grant Assistance Illinois State Board of Education	
Applicant Completed Section	
APPLICANT NAME (District Name and Number, if applicable)	
REGION COUNTY DISTRICT TYPE CODE	
16.	Legal Name (Name used for DUNS registration and grantee prequalification)
17.	Common Name (DBA)
18.	Employer/Taxpayer Identification Number (EIN, TIN)
19.	Organizational DUNS Number
20.	SAM CAGE Code
21.	Business Address (Street, City, State, County, Zip Code + 4)
Applicant's Organizational Unit	
22.	Department Name
23.	Division Name
Applicant's Name and Contact Information for Person to be Contacted for Program Matters involving this Application	
24.	First/Last Name
25.	Suffix
26.	Title
27.	Organizational Affiliation
28.	Telephone Number (Include Area Code)
29.	Fax Number (Include Area Code)
30.	E-Mail Address
Applicant's Name and Contact Information for Person to be Contacted for Business/Administrative Office Matters involving this Application	
31.	First/Last Name
32.	Suffix
33.	Title
34.	Organizational Affiliation
35.	Telephone Number (Include Area Code)
36.	Fax Number (Include Area Code)
37.	E-Mail Address

ISBE 20-06 GATA Grant Application (1/19)



Attachment 1 – Question 45

- Attachment 1 – Question 45
 - ***Amount Requested from the State*** is the amount you are requesting for the state match
 - ***Applicant Contribution*** is the remaining monies going into the project. *Local Contribution, Other Sources of Funding, or Program Income* provide the detail for and should total the Applicant Contribution Line.
 - ***Total Amount*** is the total of the Amount Requested from State and Applicant Contribution Lines combined.

45.	Estimated Funding (Include all that apply)	<div><input type="checkbox"/> Amount Requested from the State: \$ _____</div> <div><input type="checkbox"/> Applicant Contribution (e.g., in kind, matching): \$ _____</div> <div><input type="checkbox"/> Local Contribution: \$ _____</div> <div><input type="checkbox"/> Other Source of Contribution: \$ _____</div> <div><input type="checkbox"/> Program Income: \$ _____</div> <div><input type="checkbox"/> Total Amount: \$ _____</div>
-----	-----------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------



Attachment 1 – Question 45 Example #1

- ABC District is requesting a match for a \$100,000 fiber special construction project. Their C1 Discount rate is 50%.
- USAC C1 Discount of 50% - \$50000
- USAC Additional Discount for State/Tribal Match (1:1 to state match, up to 10%) - \$10000
- Remaining \$40000, or 40% of the original project amount, will be covered by state match, subject to funding availability and approvals

45.	Estimated Funding (Include all that apply)	<table><tr><td><input checked="" type="checkbox"/></td><td>Amount Requested from the State: \$</td><td>40000</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Applicant Contribution (e.g., in kind, matching): \$</td><td>60000</td></tr><tr><td><input type="checkbox"/></td><td>Local Contribution: \$</td><td></td></tr><tr><td><input checked="" type="checkbox"/></td><td>Other Source of Contribution: \$</td><td>60000</td></tr><tr><td><input type="checkbox"/></td><td>Program Income: \$</td><td></td></tr><tr><td colspan="2"></td><td><input checked="" type="checkbox"/> Total Amount: \$ 100000</td></tr></table>	<input checked="" type="checkbox"/>	Amount Requested from the State: \$	40000	<input checked="" type="checkbox"/>	Applicant Contribution (e.g., in kind, matching): \$	60000	<input type="checkbox"/>	Local Contribution: \$		<input checked="" type="checkbox"/>	Other Source of Contribution: \$	60000	<input type="checkbox"/>	Program Income: \$				<input checked="" type="checkbox"/> Total Amount: \$ 100000
<input checked="" type="checkbox"/>	Amount Requested from the State: \$	40000																		
<input checked="" type="checkbox"/>	Applicant Contribution (e.g., in kind, matching): \$	60000																		
<input type="checkbox"/>	Local Contribution: \$																			
<input checked="" type="checkbox"/>	Other Source of Contribution: \$	60000																		
<input type="checkbox"/>	Program Income: \$																			
		<input checked="" type="checkbox"/> Total Amount: \$ 100000																		



Attachment 1 – Question 45 Example #2

- Acme School District has a \$100,000 special construction fiber project and has a 20% Discount Rate
- USAC C1 Discount Rate of 20% - \$20000
- USAC State Match of 10% - \$10000
- Remaining \$70000, or 70% of the original project amount will be covered by the state match, subject to funding availability and approvals
- 20% USAC C1 Discount + 10% USAC Match + 70% State Match = 100% of special construction costs

45.	Estimated Funding (Include all that apply)	<table><tr><td><input checked="" type="checkbox"/></td><td>Amount Requested from the State: \$</td><td>70000</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Applicant Contribution (e.g., in kind, matching): \$</td><td>30000</td></tr><tr><td><input type="checkbox"/></td><td>Local Contribution: \$</td><td></td></tr><tr><td><input checked="" type="checkbox"/></td><td>Other Source of Contribution: \$</td><td>30000</td></tr><tr><td><input type="checkbox"/></td><td>Program Income: \$</td><td></td></tr><tr><td colspan="2"></td><td><input checked="" type="checkbox"/> Total Amount: \$ 100000</td></tr></table>	<input checked="" type="checkbox"/>	Amount Requested from the State: \$	70000	<input checked="" type="checkbox"/>	Applicant Contribution (e.g., in kind, matching): \$	30000	<input type="checkbox"/>	Local Contribution: \$		<input checked="" type="checkbox"/>	Other Source of Contribution: \$	30000	<input type="checkbox"/>	Program Income: \$				<input checked="" type="checkbox"/> Total Amount: \$ 100000
<input checked="" type="checkbox"/>	Amount Requested from the State: \$	70000																		
<input checked="" type="checkbox"/>	Applicant Contribution (e.g., in kind, matching): \$	30000																		
<input type="checkbox"/>	Local Contribution: \$																			
<input checked="" type="checkbox"/>	Other Source of Contribution: \$	30000																		
<input type="checkbox"/>	Program Income: \$																			
		<input checked="" type="checkbox"/> Total Amount: \$ 100000																		



Attachment 1 – Certification and Signatures

- Remember to check the “I Agree” box under Applicant Certification
- Remember to include the signature of the authorized representative empowered to apply on behalf of your district (#53).


Uniform Application for State Grant Assistance Illinois State Board of Education Applicant Completed Section (Continued)	
Areas Affected	
40. Areas Affected by the Project (cities, counties, state-wide) <i>Add Attachments (e.g., maps), if needed</i>	
41. Legislative and Congressional Districts of Applicant	
42. Legislative and Congressional Districts of Program / Project <i>Attach an additional list, if needed</i>	
Applicant's Project	
43. Description Title of Applicant's Project <i>Text only for the title of the applicant's project.</i>	
44. Proposed Project Term	Start Date: _____ End Date: _____
45. Estimated Funding <i>(Include all that apply)</i>	<input type="checkbox"/> Amount Requested from the State: \$ _____ <input type="checkbox"/> Applicant Contribution (e.g., in kind, matching): \$ _____ <input type="checkbox"/> Local Contribution: \$ _____ <input type="checkbox"/> Other Source of Contribution: \$ _____ <input type="checkbox"/> Program Income: \$ _____ <input type="checkbox"/> Total Amount: \$ _____
Applicant Certification: 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 18, Section 1001) (*) The list of certification and assurances, or an internet site where you may obtain this list is contained in the Notice of Funding Opportunity. <input type="checkbox"/> I agree	
Authorized Representative	
46. First/Last	
47. Suffix	
48. Title	
49. Telephone Number <i>(Include Area Code)</i>	
50. Fax Number <i>(Include Area Code)</i>	
51. E-Mail Address	
53. Signature of Authorized Representative	
54. Date Signed	

ISBE 20-06 GATA Grant Application (1/19)



Attachment 2

- Attachment 2 asks about your current technology status



Illinois
State Board of Education
100 North First Street
Springfield, Illinois 62777-0001

ATTACHMENT 2
Page 1 of 1

FY 2020
E-RATE STATE MATCHING GRANT PROGRAM
CURRENT TECHNOLOGY STATUS

CTE AND INNOVATION DEPARTMENT

APPLICANT NAME

REGION, COUNTY, DISTRICT, TYPE CODE

Instructions: Complete the following:

1. Does your district currently have fiber?
(If answer is NO for question 1, skip to question 3)

☐ Yes ☐ No

2. Which of the following [types of fiber connections](#) best describe your current network configuration?

☐ Leased Lit Fiber ☐ Leased Dark Fiber ☐ Self-Provisioned ☐ Other:

3. What is the maximum speed of your current fiber/Internet connection?

4. What is the monthly recurring cost of your current Internet services before E-Rate discounts are applied?

5. Which of the following [types of fiber connections](#) are you requesting bids on your FCC Form 470?

☐ Leased Lit Fiber ☐ Leased Dark Fiber ☐ Self-Provisioned

6. What is the speed of the fiber connection that you are asking for bids on your FCC Form 470 and associated RFP?

7. How many [E-Rate eligible instructional facilities](#) will this special construction project impact?

8. How many [E-Rate Non-Instructional facilities](#) (NIF) will this special construction project impact?

9. What is your E-Rate Year 2020 [Category 1 Discount Rate](#)?

10. Number of students in your school district.

11. Number of teachers in your school district.

12. Number of classrooms in your school district

13. Number of computing devices in use in your district



Attachment 3

- Program Narrative
 - Describe current ed tech program
 - Why is this project needed to meet district educational plans/goals?
 - See page 10 of RFP for additional requirements
 - Max 5 pages for narrative

ATTACHMENT 3
Page 1 of 5

FY 2020
E-RATE STATE MATCHING GRANT PROGRAM
DETERMINING NEED

APPLICANT NAME (District Name and Number, if applicable)	REGION, COUNTY, DISTRICT, TYPE CODE
----------------------------------------------------------	-------------------------------------

INSTRUCTIONS: Describe the current district/school-level program, including need. See RFP for specific direction. *Limit response to space provided.*

ISBE 04-01 E-Rate State Matching Grant (10/17)



Attachment 4

- Proposed Project/Program
 - Describe how increased speed will impact educational program
 - Describe expected program outcomes
 - See Pages 10-11 of RFP document for more details on required elements
 - Max 5 pages for narrative

ATTACHMENT 4
Page 1 of 5

FY 2020
E-RATE STATE MATCHING GRANT PROGRAM
PROPOSED PROJECT/PROGRAM

APPLICANT NAME (District Name and Number, if applicable)	REGION, COUNTY, DISTRICT, TYPE CODE
INSTRUCTIONS: Describe the proposed district/school-level program determined by need. See RFP for specific direction. <i>Limit response to space provided.</i>	

ISBE 04-01 E-Rate State Matching Grant (10/17)



Attachment 5

- Project Timeline
 - Provide a timeline of activities to meet the goals indicated in Attachment 4
 - Start and completion dates
 - Name of person responsible

ATTACHMENT 5
Page 1 of 5

FY 2020
E-RATE STATE MATCHING GRANT PROGRAM
PROPOSED PROJECT/TIMELINE

APPLICANT NAME (District Name and Number, if applicable)		REGION, COUNTY, DISTRICT, TYPE CODE	
INSTRUCTIONS: See RFP for specific direction. <i>Limit response to space provided.</i> Goal (List one per page)			
ACTIVITY	TIMELINE		PERSONS RESPONSIBLE
	START	COMPLETION	

ISBE 04-01 E-Rate State Matching Grant (10/17)



Attachment 6

- Evaluation
 - Describe how plan will be monitored and evaluated and how plan will be adjusted to ensure completion.
 - Indicate how the impact on increasing student success and/or other stated goals and objectives will be shared within your district and beyond

ATTACHMENT 6
Page 1 of 5

FY 2020
E-RATE STATE MATCHING GRANT PROGRAM
EVALUATION

APPLICANT NAME (District Name and Number, if applicable)	REGION, COUNTY, DISTRICT, TYPE CODE
INSTRUCTIONS: See RFP for specific direction. Limit response to space provided.	

ISBE 04-01 E-Rate State Matching Grant (10/17)



Attachment 7

- Budget
 - The budget must be submitted on this form
 - Use numbers from page 3 of attachment 1

ATTACHMENT 7

☐ Initial Budget ☐ Amendment No. _____
☐ Revised Initial Budget ☐ Multi-District Application

ILLINOIS STATE BOARD OF EDUCATION
CTE and Innovation Department
100 North First Street, S-284
Springfield, Illinois 62777-0001

**FY 2020
E-RATE STATE MATCHING GRANT PROGRAM
STATE BUDGET SUMMARY AND PAYMENT SCHEDULE**

Use whole dollars only. Omit Dollar Signs, Commas, and Decimal Places, e.g., 2536

Directions: Prior to preparing this Budget Summary and Payment Schedule request, please refer to the "State and Federal Grant Administration Policy, Fiscal Requirements and Procedures" handbook that can be accessed at https://www.isbe.net/Documents/fiscal_procedure_handbook.pdf. Obligations of funds based on this budget request cannot begin prior to July 1, or receipt of a substantially approvable budget request, whichever is later.

LINE	FUNCTION NUMBER (1)	EXPENDITURE ACCOUNT (2)	SALARIES (3) (ON 1804)	EMPLOYEE BENEFITS (4) (ON 2094)	PURCHASED SERVICES (5) (ON 3894)	SUPPLIES AND MATERIALS (6) (ON 4004)	CAPITAL OUTLAY** (7) (ON 5994)	OTHER OBJECTS (8) (ON 6804)	NON-CAPITALIZED EQUIPMENT** (9) (ON 7004)	TOTAL (10)	PAYMENT SCHEDULE
10	2300	General Administration								0	July-August
14	2530	Facilities Acquisition and Construction**								0	September
15	2540	Operation & Maintenance of Plant Services								0	October
20	2620	Planning, Research, Development & Evaluation Services								0	November
24	2900	Other Support Services								0	December
27	4000	Payments to Other Districts or Government Units								0	January
29	Total Direct Costs		0	0	0	0	0	0	0	0	February
30	Approved Indirect Costs x _____ %										March
31	TOTAL BUDGET									0	April
											May
											June
											July-August
											TOTAL
										0	\$ _____

** Not applicable to all grants, and in no instances can Capital Outlay, Non-Capitalized Equipment, or Facilities Acquisition and Construction Services be included in the indirect costs application.

Date _____ Original Signature of Superintendent or Administrator _____ Date _____ Original Signature of ISBE Division Administrator _____

ISBE 04-01 E-Rate State Matching Grant (10/17)



- Budget Breakdown
 - Include descriptions of anticipated expenditures, correlated to line items on the previous page.

ISBE 04-01 E-Rate State Matching Grant (10/17)



Attachment 7b

- Used after the final awards are determined, so leave blank for now



Attachment 8 and 9

- Certification and Assurance Forms
 - Please fill out and have these signed by official legally authorized to submit



Evaluations of Applications

- Application evaluation criteria described beginning of page 13 of RFP packet.

Application Review

Review and Selection Process:

The selection of the grantees will be based upon the overall quality of the application. The scoring is based upon the following criteria:

- Need is defined as the identification of stakeholders, facts, and evidence that demonstrate the proposal supports the grant program purpose;
- Capacity is defined as the ability of an entity to execute the grant project according to the project requirements;
- Quality is defined as the totality of features and characteristics of a service, project, or product that indicate its ability to satisfy the requirements of the grant program;
- Cost effectiveness is defined in the terms of tangible benefits produced by the monies spent; and
- Sustainability, which is defined as the ability to ensure that the project will continue without further state monies

Criteria:

These overall criteria are built into the criteria below. The attachment number in the parentheses following the criteria lists the portion of the proposal that will be used to determine if the criteria has been met

Following the notification of grant awards, an applicant may request copies of reviewer comments and scores by contacting [Erich Grauke](mailto:Erich.Grauke@isbe.net) at broadband@isbe.net.

Selection criteria and point values are as follows:

Not Provided	Very Limited	Somewhat Limited	Moderate	Strong	Very Strong
0	1	2	3	4	5
Response requirements are absent.	Response provides very few details to meet the criteria requirement.	Response is unclear and lacks enough evidence to meet the criteria requirement.	Response provides moderate detail and conveys potential to meet the criteria requirement.	Response provides good detail and evidence to meet the criteria requirement.	Response exceeds expectations and provides a strong evidence to meet criteria requirement.

Section 1: The school district has demonstrated a need for the proposed project, activity, and/or resources. 30 Points	Possible Points
The proposal describes the status of the applicant's educational technology programs and demonstrates that students' access to educational opportunities in this curricular area is limited to an undesirable degree. (Attachments 2 and 3)	5
The proposal provides a clear description of the needs found between the anticipated technology required within the district for at least the next five years and the current	5



Next Steps

- File Form 470 and associated RFP
 - Wait the required 28 days per USAC rules
- Choose vendor from submitted proposals after 28 day period has elapsed
 - Make sure to follow all USAC rules regarding competitive bid evaluations
- File E-Rate State Matching Grant Application along with copy of FCC Form 470 , RFP, and selected vendor proposal with ISBE by Friday, May 1, 2020 at 4:00 p.m.



Submitting Application to ISBE

- It is **STRONGLY** encouraged that applicants use the [send ISBE a file](#) tool on www.isbe.net

The screenshot shows the ISBE website homepage. At the top is a dark blue navigation bar with icons and labels for HOME, ADMINISTRATORS, TEACHERS, FAMILIES & STUDENTS, COMMUNITY & PARTNERS, NEWS & MEDIA, and TOPICS. Below this is a main content area with four green-tinted boxes: FINANCE, BUDGETS & FUNDING; INNOVATION & IDEAS; NUTRITION; and SPECIAL EDUCATION. Each box contains a list of links to various programs and services. At the bottom, there is a light blue section for 'ISBE'S WEEKLY MESSAGE' and 'CALENDAR', followed by a footer with contact information and social media links.

← → ↻ isbe.net ☆ | ⓘ | ⋮

HOME ADMINISTRATORS TEACHERS FAMILIES & STUDENTS COMMUNITY & PARTNERS NEWS & MEDIA TOPICS

FINANCE, BUDGETS & FUNDING

- Agency Budget Information
- Federal and State Monitoring
- Funding and Disbursements
- School Finance
- Evidence-Based Funding
- State Funding & Forecasting

INNOVATION & IDEAS

- Born, Built, Grown
- Competency Pilot
- Educational Technology
- Illinois Virtual Course Catalog
- Great Ideas

NUTRITION

- Child and Adult Care Food Program
- Food Distribution
- School Nutrition Programs
- Summer Food Service Program

SPECIAL EDUCATION

- Effective Dispute Resolution
- IDEA Part B Grant Program Information
- Individualized Education Programs (IEPs)
- Laws, Regulations, and Guidance Programs and Services
- State Performance Plan, Data, and Accountability

ISBE'S WEEKLY MESSAGE

Daily Messages

Due to the suspension of in-person instruction, Superintendent Ayala began sending daily messages to the field on March 13. To view daily messages, visit www.isbe.net/covid19 under Latest Updates or Messages from the Superintendent.

[view all messages >](#)

CALENDAR

ISBE related meetings and events

FACT SHEETS


Infographics explaining important topics

Agency Information
100 N. 1st Street • Springfield, IL 62777 • 866-262-6663 • 217-782-4321 • [Directions](#) • [Office Information](#)
100 W. Randolph, Suite 14-300 • Chicago, IL 60601 • 312-814-2220 • [Directions](#) • [Office Information](#)

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Submitting Application to ISBE

 Illinois State Board of Education

ATTACHMGR HOME | ISBE HOME | LOGOUT

Attachment Manager

Welcome to ISBE's file transfer page. Enter the information below to transmit a data file to an ISBE employee.
For technical assistance, please contact our Call Center at 217-558-3600.

⚠ = required

Sender Information

Name : ⚠

Entity Name :

eMail Address : ⚠

Receiver Information

ISBE eMail Name : ⚠

Attachment(s)

Choose File	No file chosen
Choose File	No file chosen
Choose File	No file chosen
Choose File	No file chosen

If uploading from a removable drive please do not remove the media from the drive.

Message

Subject : ⚠

Message : ⚠

Submit Reset

In the ISBE eMail Name menu, select GRAUKE,ERICH H

Up to four files can be sent per session. If additional files need to be sent, start a new Attachment Manager session. Documents can also be combined into one file if needed.



Helpful Resources

- Education SuperHighway has RFP templates for special construction projects at <https://www.educationsuperhighway.org/resources/>
- The Learning Technology Center of Illinois offers E-Rate support. More information at www.ltcillinois.org/erate



Questions

- Email questions to broadband@isbe.net