

Budget Written Testimony Form

Enter Contact Information

Enter the following required information:

- First and Last Name
- Title/Role
- Address (street, city, state, ZIP code)
- Email
- Speaker's Organization
- Organization that you have been authorized by to speak on its behalf, if different than your organization
- Telephone

Written Testimony Form

Information of Person Providing Testimony

All fields are required in order to proceed to the next section. After the contact information has been completed, click "Add Program Request" to enter information regarding the funding request. You must click "Add Program Request" for each additional funding request.

First Name:	Last Name:
Title/Role:	
Address (street, city, state, ZIP code):	Speaker's Organization:
	Authorized Organization (if different than your own):
Email:	Telephone Number:

 Add Program Request

Budget Hearings: *

Please select one of the options to indicate which budget hearing you intend to speak, or select the last option if you do not want to speak but want to submit a written funding request.

- ☐ October 5 (Virtual): 1-4 p.m.
- ☐ October 21 (Springfield): 4-7 p.m.
- ☐ November 5 (Virtual): 4-7 p.m.
- ☐ I do not plan to attend a budget hearing but still wish to submit written testimony.

 Selection required to submit request.

Next, select whether you will be attending one of the budget hearings.

If you are speaking virtually, you will need to click the blue Register button to complete your registration.

Click the link below to complete your registration to speak at the virtual hearing.

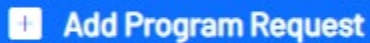
[Register for the October 5 Budget Hearing](#)

Submission of written testimony alone will be considered equivalent to oral testimony.

Add a Program Request

After the contact information has been completed, click Add Program Request to enter information regarding the funding request.

You must click Add Program Request for each additional funding request.

 Add Program Request

Select a Program

Included in the Select a Program drop-down are programs that were funded in fiscal year 2027. If you do not see a specific program, select Other - New and provide the name of the program, the amount you are requesting, and a description.

Add Program for Which Funding is Requested

Select a program name. If you do not see the program, please select **"Other - New"** and provide a description of the program. Once this program request is completed, click "Save." To add additional programs, click "Add Program Request." Otherwise, proceed to submit.

Select a Program:

Current Funding:

Additional Requested Funding:

Total FY 2028 Funding:

\$

Required Board Elements Narrative:

Please provide the Board with a description of your funding request and sufficient detail to justify the funding request. The Board has identified the following elements be included in this narrative: program description, program goals or what is expected to be accomplished with the funding, including, if possible, baseline data (for a prior year or current year for the program) and estimated data for FY 2028, assuming the funding request is funded and implemented.

Close

Save

For the Required Board Elements Narrative section, provide the Board with a description of your funding request and sufficient detail to justify the funding request. The Board has identified the following elements be included in this narrative:

- Program description
- Program goals or what is expected to be accomplished with the funding, including, if possible, baseline data (for a prior year or current year for the program) and estimated data for FY 2028, assuming the funding request is funded and implemented

You will only have the option to edit the amount and the description of the program after you click Save.

Once this program request is completed, click Save.

To add additional programs, click Add Program Request, which is located below your contact information.

Submit

Individuals may also submit additional information to advocate for their funding requests by emailing materials to **ISBEFY28@isbe.net**. This email address should only be used to submit supplemental materials.

ISBE will only accept funding requests that were submitted using the online form.

Please be sure to include the reference number that is displayed once the information is submitted.

Submit

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☒ Once all information has been entered, please check this box and then click the "Submit" button. **Information cannot be changed after clicking the "Submit" button.**

 I'm not a robot



☒ **SUBMIT**

Reference number example:

Budget Request Submitted Successfully

Thank you for submitting your budget request for the Budget Hearing. Please submit any other documentation you wish to provide to support your budget request to ISBEFY28@isbe.net.

Reference Number: 28-003