



100 North First Street
Springfield, Illinois 62777-0001

ATTACHMENT 1

Uniform Application for State Grant Assistance

Agency Completed Section		
1.	Type of Submission	<input type="checkbox"/> Preapplication <input type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application
2.	Type of Application	<input type="checkbox"/> New <input type="checkbox"/> Continuation (i.e. multiple year grant) <input type="checkbox"/> Revision (modification to initial application)
3.	Date/Time Received by State (Completed by State Agency upon Receipt of Application)	
4.	Name of the Awarding State Agency	Illinois State Board of Education
5.	Catalog of State Financial Assistance (CSFA) Number	586-84-3442
6.	CSFA Title	NSLP Equipment Assistance Grant Program
Catalog of Federal Domestic Assistance (CFDA) <input type="checkbox"/> Not applicable (No federal funding)		
7.	CFDA Number	10.579
8.	CFDA Title	Child Nutrition Discretionary Grants Limited Availability
9.	CFDA Number	n/a
10.	CFDA Title	n/a
Funding Opportunity Information		
11.	Funding Opportunity Number	25-4260-00
12.	Funding Opportunity Title	FY 2025 NSLP Equipment Assistance Grant
13.	Funding Opportunity Program Field	School Nutrition
Competition Identification <input checked="" type="checkbox"/> Not applicable		
14.	Competition Identification Number	n/a
15.	Competition Identification Title	n/a

**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
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16.	Legal Name (Name used for UEI registration and grantee prequalification)	
17.	Common Name (DBA)	
18.	Employer/Taxpayer Identification Number (EIN, TIN)	
19.	Organizational UEI 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.	Email 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.	Email Address	

**Uniform Application for State Grant Assistance
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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 Organizational Unit

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: \$ _____ <div style="text-align: right;"><input type="checkbox"/> Total Amount: \$ _____</div>

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 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)

☐ 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.	Email Address	
53.	Signature of Authorized Representative	
54.	Date Signed	

**NATIONAL SCHOOL LUNCH PROGRAM
EQUIPMENT ASSISTANCE GRANT**

Project Proposal/Equipment Request

NUTRITION DEPARTMENT

Section 1 – Applicant Information

1a. School Food Authority (SFA) District/Entity Name

1b. RCDT Code Format: 00-000-0000-00

Section 2 – Project Focus and Type

2a. Focus areas are based upon the grant program goals and objectives. The equipment requested in this proposal must support SFA efforts toward making achievements in one or more of the focus areas for the National School Lunch Program (NSLP) and/or School Breakfast Program (SBP).

Select one or more:

Improved food quality and serving healthier meals

Facilitate more fresh fruit/vegetable offerings at lunch or breakfast, enable scratch cooking, provide healthier cooking methods such as steaming/baking/grilling foods, etc.

Improved food safety

Maintain proper temperature, decrease cross-contamination risks, improve sanitation, etc.

New implementation of the School Breakfast Program

Expansion of the School Breakfast Program

Add serving locations around the school, as allowable, initiate/expand Breakfast After the Bell, etc.

Increased efficiency of operations related to procurement, food storage, and/or distribution service

Expand storage capacity, improve flow/additional service lines, etc.

Provision of convenience and appeal to the student population

Increase variety, entrée choices, add distribution methods, etc.

2b. Project type may include replacement of an existing equipment item, addition of a new equipment item, or renovation of an existing equipment item.

Select one:

Replacement of existing equipment

Replace an existing equipment item with the purchase of a new item that is similar in function and capacity; the existing item will no longer be used.

Addition of new equipment

Purchase an item that does not replace an existing item. The new item adds new functionality or increased capacity that did not previously exist.

Renovation of existing equipment

Make additions, improvements, modifications, replacements, or alterations to existing equipment that significantly extends its useful life and/or materially increases its value (not ordinary repairs or routine maintenance).

3b. Equipment Description/Specifications

Site Name	WINS Site Number
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Street Address	City	ZIP Code
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NO – The equipment is only for operations of the single program site where it is located.

Centralized Food Production (Central Kitchen)
Centralized Product Storage (Central Warehouse)
Transport of Meals to Program Sites

Section 4 – Project Narrative

The project narrative should provide enough information and details for reviewers to evaluate need, capacity, and quality of the proposed project.

Narrative Requirements:

- 4a. Address the need for the proposed project. Describe the age and overall condition of the existing equipment that is being replaced or renovated/refurbished. If adding new equipment, describe the purpose of adding new equipment and explain why existing equipment does not meet that purpose.**
- 4b. Describe any research, comparison, analysis, and/or consideration that was conducted to decide on equipment model, size, specifications, or type of equipment to purchase that would best meet program needs. Or, if renovating equipment, explain why it is more economical, efficient, or necessary to renovate versus replacing with new or different equipment.**
- 4c. Explain how the proposed project will support the focus areas that were indicated in Section 2a of this form.**

Attach additional page(s) if more space is needed.

Section 5 – Allowable Costs

Awarded funds may only be used for a capital expenditure to purchase or renovate a single, pre-approved piece of equipment. All costs – whether paid in whole or in part with grant funding – must be necessary, reasonable, and allocable to the program.

As it pertains to this funding opportunity, the term “equipment” is defined by federal regulation at [2 CFR Part 200.1](#) and by [Public Law 118-42](#). Equipment is defined as tangible, nonexpendable personal property having a useful life of more than one year and an acquisition cost of greater than \$1,000 per unit.

5a. Complete the budget table below, including all costs associated with acquiring new/replacement equipment or costs associated with renovation of existing equipment.

Acquisition Costs: <i>The cost of the equipment, including the cost to ready the equipment for its intended use.</i>	Projected Cost
Net invoice price of the equipment (list price, net of any discounts)	
Cost of any modifications, attachments, accessories, or auxiliary apparatus necessary to make the equipment usable for the purpose for which it is acquired Examples: <ul style="list-style-type: none"> - Caster wheels, included with the purchase a double stack convection oven, are necessary for configuration of stacked oven and mobility of the unit. - Wire shelving, included with the purchase of a walk-in refrigeration unit, is necessary to make the walk-in unit usable for food storage. - Accessory kit, included with the purchase of a base food processor unit, is necessary to use the processor for food prep. This does NOT include small wares or supplies.	
Shipping, freight, or delivery costs	
Installation costs	
Total Acquisition Cost:	
Renovation Costs: <i>Additions, improvements, modifications, replacements, or alterations to existing equipment that significantly extends its useful life and/or materially increases its value – this does NOT include ordinary repairs or maintenance.</i>	Projected Cost
Service charge/labor	
Parts/materials	
Total Renovation Cost:	

5b. The maximum grant award is \$25,000 or the total projected cost, whichever is less.

Enter the amount¹ of grant funding requested:

¹ If the equipment will be used in part for any other purpose that is not associated with the Child Nutrition Programs, only the percentage of costs allocable to the Child Nutrition Programs may be included in the amount requested.