

**MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION  
STANDARD CONTRACT FORM AND APPLICATION FOR PROGRAM GRANTS**

**PART I – GENERAL**

<b>A. APPLICANT:</b>	<i>District Code:</i>				
<b>ADDRESS:</b>					
<b>TELEPHONE: (        )</b>					

<b>B. APPLICATION FOR PROGRAM FUNDING</b>				
FUND CODE	PROGRAM NAME	PROJECT DURATION		AMOUNT REQUESTED
FY2010	FEDERAL – COMPETITIVE GRANT administered by ADULT AND COMMUNITY LEARNING SERVICES	FROM	TO	
494	Workplace Education Planning Grant	Upon Approval	9/30/2009	

C. I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT AND COMPLETE; THAT THE APPLICANT AGENCY HAS AUTHORIZED ME, AS ITS REPRESENTATIVE, TO FILE THIS APPLICATION; AND THAT I UNDERSTAND THAT FOR ANY FUNDS RECEIVED THROUGH THIS APPLICATION THE AGENCY AGREES TO COMPLY WITH ALL APPLICABLE STATE AND FEDERAL GRANT REQUIREMENTS COVERING BOTH THE PROGRAMMATIC AND FISCAL ADMINISTRATION OF GRANT FUNDS.

<b>AUTHORIZED SIGNATORY:</b>	<b>TITLE:</b>
<b>TYPED NAME:</b>	<b>DATE:</b>

**DATE DUE: FRIDAY, JULY 17, 2009**

**Competitive proposals must be received at the Department by 3:00 p.m. on the date due.**

**Mail the 494 proposal listed on this signature page to:**

**Olivia Steele**  
**Adult and Community Learning Services**  
**Massachusetts Department of Elementary and Secondary Education**  
**75 Pleasant Street**  
**Malden, MA 02148-4906**

**Number of sets: Four (4) sets, with an original signature of the Superintendent/  
Executive Director/President (in blue ink) on TWO sets**

***DO NOT WRITE BELOW THIS LINE***

<b>MASSACHUSETTS DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION USE ONLY</b>	
<b>GRANTS MANAGEMENT</b>	
<b>For the Department Authorized Signatory:</b>	<b>Date:</b>