Assurances

The undersign agree to all of the following in order to be eligible for funding made available under the Cy Pres component of the Microsoft settlement:

1. Districts are not eligible for funding. Only individually identified building(s) are eligible, but the district must apply on behalf of the eligible building(s).

2. These funds will be used to supplement and not supplant current district/building efforts and funding.

3. The district will expend funds and provide invoices for reimbursement of approved expenses to the claims administrator.

4. There is sufficient building staff support for this project and the accompanying technology.

5. There is sufficient administrative support for this project and the accompanying technology.

6. There is sufficient board support for this project and the accompanying technology.

7. The infrastructure to support the project will be in place before the project is started and support structures are in place for the project to be successfully implemented. The technology and software is interoperable with current technology in place or can be integrated with the existing system. The school will provide high speed Internet access/connection to students at a bandwidth level sufficient to support the project.

8. The school and the district have or will connected the efforts of this project to the school's and district's implementation of the Iowa Core Curriculum.

9. Professional development activities linked to the intervention will represent at least **30% of the General Purpose Voucher**.

10. Economies of scale shall be sought by way of strategies including, but not limited to, collaboration, training, and implementation efforts.

11. The school and professional development provider will make every effort to capture digital evidence of student's authentic work and teachers' best practices that occur during the time frame of the project.

12. The school/district will cooperate with an external evaluator to provide information and data as related to the evaluation of the overall effectiveness of the program.

District Name (PRINT) _____   Building_____

Board President, (Print name) _____signature_____

Superintendent, (Print name) _____signature_____

Building Principal, (Print name) _____signature_____

 IT Director, (Print name) _____signature_____