



1. Type of Application

New

Revised/Corrected

2. Applicant Legal Name (Name Used For DUNS Registration)

3. UEI/DUNS Number

4. Common Name (DBA - if applicable)

5. Employer/Taxpayer ID Number (EIN/TIN)

6. GATA ID Number

7. Business Address (Street, City, County, State, Zip+4)

8. Institution Legislative District

9. Institution Congressional District

10. Contact Information Regarding Construction/Renovation Matters (Name, Title, Telephone #, Email Address)

11. Contact Information Regarding Financial/Administrative Matters (Name, Title, Telephone #, Email Address)

12. Does the institution have a formal equity plan in place to close gaps in enrollment, retention, completion, and student loan repayment rates for underrepresented students (for example, an equity plan developed as part of the Partnership for College Completions Illinois Equity in Attainment (ILEA) initiative)?

Yes

No

If Yes, please include plan with this application.

If no, IBHE will soon be issuing guidance on the formal Equity Plan process outlined in statute. In the interim, please describe your holistic strategies for closing gaps in enrollment, persistence, completion, and student loan repayment for underrepresented students, including low-income students, students of color, working adults, or students from rural areas.

Please include a 1 – 3 page description of strategies, programs, or policies and practices being implemented. Consider efforts to address learning renewal as a result of pandemic-disrupted learning; meeting social-emotional needs; addressing basic needs; providing academic and non-academic supports; implementing high-impact practices; offering summer bridge or summer courses; using findings from campus climate surveys; efforts to diversify faculty and staff; strategies to increase affordability; and the like. (see [https://ibhestrategicplan.ibhe.org/SP\\_Equity\\_Strategies.html](https://ibhestrategicplan.ibhe.org/SP_Equity_Strategies.html) from the higher education strategic plan, <https://ibhestrategicplan.ibhe.org/IBHE-Strategic-Plan-2021.html>, for more examples).

13. Does this application request funding for multiple projects?

Yes

No

If yes, please complete separate section, on following pages, for each project.

If no, please complete only information for Project #1.

PROJECT #1

14. Project #1 - Name

15. Project #1 - Location (Building Name, Address, City, County, Zip Code)

16 Project #1 - Requested funding will be used for (check all that apply):

Construction of a new facility

Addition to an existing facility

Repair/Renovation of an existing facility

Miscellaneous capital improvement

17. Project #1 - Total Cost of Project (This total should include funding from all sources - i.e. State/IBHE, Institution, etc)

18. Project #1 - Applicant confirms that total project cost listed above matches that provided in attached application budget template.

Yes

19. Project #1 - Was this project cost estimate provided by a licensed Architect/Engineer or construction contractor?

Yes

No

20. Project #1 - How old is your project cost estimate?

Less than 6 months

6 months to 2 years

Over 2 years

21. Project #1 - Should total cost of project exceed estimate above, please describe plan to cover cost overrun.

22. Project #1 - Description/Scope of Work - Please provide a detailed description of the proposed project for which grant funds are being requested. Please include information on due diligence performed, zoning issues or requirements; and building code compliance concerns; square footage of new, renovated or additional space; and any environmental studies performed, as applicable, for the project.

23. Project #1 - Please provide an estimated schedule of major construction milestones. At a minimum, be sure to address when design is expected to be complete, when bidding is expected to occur, when construction is expected to be complete, and when renovated/constructed facility will go into service.

PROJECT #2

24. Project #2 - Name

25. Project #2 - Location (Building Name, Address, City, County, Zip Code)

26 Project #2 - Requested funding will be used for (check all that apply):

- Construction of a new facility
- Addition to an existing facility
- Repair/Renovation of an existing facility
- Miscellaneous capital improvement

27. Project #2 - Total Cost of Project (This total should include funding from all sources - i.e. State/IBHE, Institution, etc)

28. Project #2 - Applicant confirms that total project cost listed above matches that provided in required application budget template.

Yes

29. Project #2 - Was this project cost estimate provided by a licensed Architect/Engineer or construction contractor?

Yes

No

30. Project #2 - How old is your project cost estimate?

Less than 6 months

6 months to 2 years

Over 2 years

31. Project #2 - Should total cost of project exceed estimate above, please describe plan to cover cost overrun.

32. Project #2 - Description/Scope of Work - Please provide a detailed description of the proposed project for which grant funds are being requested. Please include information on due diligence performed, zoning issues or requirements; and building code compliance concerns; square footage of new, renovated or additional space; and any environmental studies performed, as applicable, for the project.



33. Project #2 - Please provide an estimated schedule of major construction milestones. At a minimum, be sure to address when design is expected to be complete, when bidding is expected to occur, when construction is expected to be complete, and when renovated/constructed facility will go into service.

## 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 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)

I also certify that:

- i) The institution is an independent college as defined in Section 1031.20 of Joint Rules for the Independent Colleges Capital Investment Grant Program;
- ii) There is no by-law, article of incorporation, policy or other barrier to receiving State funds;
- iii) Grant funds will be used for capital projects as defined in Section 1031.20;
- iv) Grantee will comply with the business enterprise program practices for minority-owned businesses, women-owned businesses, and businesses owned by persons with disabilities of the Business Enterprise for Minorities, Women, and Persons with Disabilities Act [30 ILCS 575] and the equal employment practices of Section 2-105 of the Illinois Human Rights Act [775 ILCS 5]. This requirement is in addition to the requirement that the grant agreement contain a provision that grantee will comply with the aforementioned statutes. (Section 45 of the State Finance Act [30 ILCS 105]); and
- v) Grantee will comply with all requirements of the Illinois Works Apprenticeship Initiative, which is required on all public works projects estimated to cost \$500,000 subject to the exceptions in the Section 20-20 of the Illinois Works Jobs Program Act. (Section 20-20 of the Illinois Works Jobs Program Act [30 ILCS 559])

Authorized Representative Name

Authorized Representative Title

Authorized Representative Telephone Number

Authorized Representative Email Address

Authorized Representative Signature

Date Signed