

Illinois State Library

OER GRANT APPLICATION

For ISL Use Only

Enter your initials to confirm authorization to submit this application and that you have read and understand the Program Overview for this grant offering from the Illinois State Library. If your initials have not been entered (typed) on this line, the application will not be reviewed or considered for funding by the State Library.

	Initials	Date				
ID	ENTIFYING INF	ORMATION				
1.	Submitting Age	ency:				
2.	Control Numb	er:		_ Branch Number:		
3.	Name of Proje	ect Director:				
		Pr	efix (e.g., Dr., Mr., Mrs., Ms.)	First Name	Last Name	
4.	Contact Infor	mation for Pr	oject Director:			
	Email:					
	Telephone:		Extension:	Fax:		
5.	Work Mailing	Address:				
	Building Name	e:				
	Street or P.O.	Box:				
	City:			, Illinois ZIP + 4	4:	

6. Project Title:

7. Abstract: In 90-160 words, provide a brief and explicit description of the proposed project in whole, including a project overview, goals, and impact on students. (This abstract will be used for publicity and promotion if this application is selected for funding.)

8.	Does this application represent multiple institutions?	🛛 Yes	🗆 No
	If yes, please list:		

- 9. If more than one OER application is being submitted, rank the priority order for this application, with 1 being the highest priority:
- 10. Category or categories for OER? (Check all that apply).
 - Author Create and adopt a substantially new open textbook or open course where it is possible to demonstrate that quality resources are not currently available to meet learning objectives.
 - Revise/Remix Update existing OER with major revisions or develop custom course content from multiple open educational resources and original open content in order to support learning objectives not met by existing open resources.
 - Ancillaries Adopt existing OER and create ancillaries such as quiz question banks, lecture slides, or lab manuals.
 - **Update** Update and adopt existing OER that requires minor editing for currency or relevance, without major changes to the content or structure.
- **11.** Please confirm:
 - Yes, all resources created with this grant will be given the license of Creative Commons Attribution 4.0 International / CC-BY 4.0 International. <u>https://creativecommons.org/licenses/by/4.0/</u>

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CONTROL NUMBER BRANCH NUMBER

BUDGET

12. Details and Explanation for Use of Grant Funds

Salaries/Wages/Benefits: Salaries, wages, and fringe benefits paid with grant funds for staff contributing directly to the project. List position titles (not names), number of full-time equivalent (FTE) in that position, and anticipated hours devoted to the project.

Position Title	#FTE	Anticipated Hours	\$ Amount
TOTAL			

Consultant Fees: Includes all expenses related to acquiring the services of a consultant for a specific activity within the project. Provide the consultant's name and the area of expertise that the consultant brings to the project.

Name and Expertise	\$ Amount
TOTAL	

Travel: Travel must be directly related to OER project activities. This includes transportation and may consist of per diem while in travel status. Budget an economical mode of transportation, considering travel time, costs, and purpose for travel. Provide the number of travelers, destination, purpose for travel, and a description of the travel expenditures budgeted (i.e., mileage, hotel, per diem).

Number of Travelers	Destination and Purpose	Type of Travel Expenditures	\$ Amount
		TOTAL	

Supplies/Materials: Include costs for supplies and materials necessary for the success of the project. Examples include books, nonprint resources, virtual or tangible materials, and computing devices if the acquisition cost per unit is less than \$5,000.

TOTAL

Provide descriptions and quantities of all supplies and materials proposed.

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Equipment: The acquisition cost per unit is \$5,000 or more.

TOTAL

Provide descriptions and quantities of equipment proposed and cost.

Services: Budget project activities to be undertaken by a third-party contractor or vendor as Services. Services may include but are not limited to subscriptions, hiring a firm to provide instruction and training and technical assistance, and outsourcing necessary to support the project.

TOTAL

Identify the costs and parameters for grant-funded services or activities, including the name of the vendor, firm, or organization providing the direct service, if known.

BUDGET SUMMARY:

Budget Line	Total
Salaries/Wages/Benefits	
Consultant Fees	
Travel	
Supplies/Materials	
Equipment	
Services	
Total Direct Costs	

Indirect (Facilities and Administrative) Costs: Indirect costs are incurred for the organization's overall objectives and, therefore, cannot be identified specifically for a particular project. Typical examples of indirect costs are general telephone service, audit costs, utilities, general office supplies, and administrative or financial operations such as audit costs. If you choose to request indirect costs, you must exclude all indirect-cost-type items from other budget lines.

Choose One:

No Indirect Costs	
Indirect Costs may not exceed 10% of the Total Direct Costs.OER grants will be awarded state funds.	

Total Grant Request	

Submit these required attachments:

I. Application Narrative:

Attach a narrative description of your project in whole. Include the following with each section labeled.

1) Administrative Capacity.

- a) Describe your agency's capacity to administer the project. This may include internal controls such as policies for procurement (e.g., bids required, purchase orders), procedures for hiring, travel rules, or others as appropriate to the proposed activities.
- b) Describe the qualifications of key staff to be involved with this project and the roles they will perform. Include job title, email, phone, and address. Please note the application requires that your project have someone in the following roles (one person may fill more than one role, but not all roles). It is not necessary to attach resumes.
 - Project director
 - Instructional designer
 - Proofreader
 - Copyright specialist
 - Accessibility coordinator
 - Subject matter specialists/authors
 - Peer reviewers

2) **Project Description**

Provide a high-level overview of the project. Include the following in the description:

- a) OER to be created and shared as a result of this grant. [Summary of information in Attachment 1]
- b) Number of students impacted by the grant over a one-year period. [Summary of information from Attachment 1]
- c) Total cost savings to students for all courses over a one-year period. Please include information about how you calculated student savings. [Summary of information from Attachment 1]
- d) If appropriate, explain the roles of partnering institutions.

3) Project Schedule

Provide a timeline illustrating when actions and activities will be scheduled or completed (e.g., August – planning meetings with partnering agencies; September-October – development of OER; October 15 – submit quarterly report; Spring 2025 begin instruction using OER). ** Please note – activities must be completed by June 30, 2026.

II. Attachment 1

Complete an Attachment 1, the Course and OER Creation Information, for **each** course for which OER will be created or revised.

III. Attachment 2

Complete an Attachment 2, the signed Agreement to Adopt OER, for each course **AND** each faculty member or instructor for which OER will be created or revised.

IV. Certification of compliance with PA 103-010