




Perkins Equipment and Curriculum Requests: Completion Tips

This document is intended to assist Perkins Consortia Leaders as they complete the Perkins Equipment/Curriculum Request Form for items in support of their career and technical education (CTE) programs. **All questions and fields** must be completed/addressed or the form will be returned. **Note:** Fields in the form that display the message “[click to select]” have drop-down menus. The user clicks the triangle menu button on the right and selects **one choice** from the menu that appears. For all other fields, the user **types** the information into the box.

 DEPARTMENT OF EDUCATION		1500 Highway 36 West Roseville, MN 55113-4266		Secondary Carl D. Perkins Equipment/ Curriculum Approval Form	
Please submit this completed form, documentation of equipment specifications and ordering information to the Minnesota Department of Education (MDE), Career and Technical Education (CTE) office at mde.cte@state.mn.us .					
Date:	<input type="text"/>	Perkins Consortium:	<input type="text" value="[click to select]"/>		
Secondary Perkins Contact:	<input type="text" value="[click to select]"/>				
District Number:	<input type="text"/>	School Building:	<input type="text"/>	Room:	<input type="text"/>
Licensed CTE Teacher Name:	<input type="text"/>		Folder Number:	<input type="text"/>	
Please consult the approved program database found on the MDE website to correctly identify the program and course(s) associated with this request: https://education.mn.gov/MDE/dse/cte/progApp/					
CTE Approved Program Code:	<input type="text" value="[click to select]"/>		Course Code(s):	<input type="text"/>	
2nd Approved Program Code:	<input type="text" value="[click to select]"/>		Course Code(s):	<input type="text"/>	
Equipment Description/Special Expenditure Request: <input type="text"/>					
Total Equipment/Expenditure Cost: \$		<input type="text"/>	Total Consortium Expenditure: \$		<input type="text"/>

Room: If the equipment is mobile and/or will be stored/used in more than one room, list all relevant room numbers.

Licensed CTE Teacher Name and Folder Number: The teacher should be listed on the secondary approved program on file with the Minnesota Department of Education (MDE), and their folder number should show they have an appropriate CTE license for the approved program related to the request. (List multiple teachers if appropriate.)

Approved Program Codes and Course Codes: A link is provided to the approved program database. Program and course codes connected to where the requested item(s) will be used should come from this list. Use the 2nd Approved Program Code field if the item(s) will be used in more than one approved program. (Select multiple program codes if appropriate.)

Equipment Description/Special Expenditure Request: Provide product specifications (size, speed, capacity, etc.) which will be used to evaluate whether items requested meet criteria for “industry standard” equipment. NOTE HERE if this specification was recommended by the Advisory Committee and attach meeting minutes, or include a letter of support from industry partners/advisory committee members.

Total Equipment/Expenditure Cost: Total of all request items.

Total Consortium Expenditure: The total amount **from Perkins funds** the consortium is requesting for approval. (Lower than Total Cost if funds from another source will offset a portion.)

Is this equipment identified in your consortium Perkins plan? ☐ Yes ☐ No

If yes, where can this information be found?

Briefly describe how this expenditure supports career and technical education within your CTE courses.

Add required attachments (Ex: price quote, product specifications)

Please select "yes or no" for the following statements regarding the requesting consortium.

☐ Yes ☐ No this purchase supports a state-recognized program of study identified in your consortium plan.

☐ Yes ☐ No the course receiving equipment offers postsecondary credit.

☐ Yes ☐ No this expenditure was funded previous years.

If yes, explain funding source:

☐ Yes ☐ No this expenditure is supported by matching funds.

If yes, list percent and source of outside funds:

Equipment Identified in Your Consortium Perkins Plan: Occasionally, MDE receives requests that **are** connected to secondary approved programs but are **not** connected to a consortia State-Recognized Program of Study. Those requests will be considered and we ask that you answer "**Yes**" and identify in which section of the plan that information could be found (Narrative 2, or Program of Study 5, action plan #3 in local needs assessment, etc.).

Briefly Describe How This Expenditure Supports CTE: Narrative on how the requested item will be used by students to develop industry-standard knowledge and technical skills in the identified Program of Study career pathway.

Click to Insert Attachments Button: Click to attach **required** documentation on the pricing and product specifications. If these are not attached the form will be **returned**. (**NOTE: Button only works with full version of Adobe Acrobat, not Reader.**) If Attachment button does not work, submit attachments in email to MDE along with the Request Form.

Complete the following requesting consortium Yes or No radio buttons as follows:

- **State-Recognized Program of Study:** If marked **Yes**, the District should have been included among those identified in the Consortium Plan. (Refer to the POS Spreadsheet matrix provided by MDE.)
- **Postsecondary Credit:** If marked **Yes**, this information should be found on the course syllabi and program approval spreadsheet from the approval on file with MDE.
- **Funded Previous Years:** We are seeking verification that "supplanting" will not be involved. If items are being updated to align to current industry standards, explain the funding source for the original purchase.
- **Matching Funds:** If non-Perkins funds will offset some of the total cost (the difference between the two totals above), mark **Yes** and identify the source and percent of funding they are providing.

Recommended Best Practices

- Maintain an up-to-date list of district approved programs and CTE licensed teachers with file folder numbers.
- Do **not** accept any requests that do not include attachments identifying product specifications and a price quote.
- You **CAN** attach a Word document with additional narrative for product specifications and request explanations that do not fit in the narrative fields on the form. You can also include any letters of support from industry partners or advisory committee members.
- You are not required to use this form **within** your consortium, however this is the form you are required to turn in to MDE. It is up to you if you want teachers to fill this form out, but you should be checking for accuracy and completion before YOU submit it to MDE.
- Utilize the Perkins V Uses of Funds reference document ("[General Guidance for Perkins V Local Uses of Funds](#)") to verify that the items requested are allowable Perkins expenditures.