

REFERENCE AREA

S&amp;L AREA

PROVIDER AREA

HELP

Select your school or library for  
NCES Code: 26 19950

If after careful review, your entity is not found, please contact the SLC Client  
Service Bureau at 1-888-203-8100 for assistance.

|                                  | School/Library Code | Billed Entity Number | Name                           | Street Address         |
|----------------------------------|---------------------|----------------------|--------------------------------|------------------------|
| <input type="radio"/>            | 05653               | 56837                | ARCADIA ELEMENTARY SCHOOL      | 932 BOSWELL LN,        |
| <input type="radio"/>            | 05677               | 56831                | CENTRAL SR HIGH SCHOOL         | 2432 N DRAKE RD,       |
| <input type="radio"/>            | 05655               | 56865                | CHIME ELEMENTARY SCHOOL        | 6750 CHIME ST,         |
| <input type="radio"/>            | 00048               | 56845                | CONT EDUC FOR YOUNG FAMILIES   | 714 S WESTNEDGE AVE,   |
| <input type="radio"/>            | 05656               | 56805                | EDISON ELEMENTARY SCHOOL       | 924 RUSSELL ST,        |
| <input type="radio"/>            | 05657               | 56812                | GREENWOOD ELEMENTARY SCHOOL    | 3501 MORELAND ST,      |
| <input type="radio"/>            | 05658               | 56833                | HILLSIDE JR HIGH SCHOOL        | 1941 ALAMO AVE,        |
| <input type="radio"/>            | 05659               | 56832                | INDIAN PRAIRIE ELEM SCHOOL     | 3546 GRAND PRAIRIE RD, |
| <input type="radio"/>            | 05660               | 56850                | JOHN F KENNEDY CENTER          | 1411 OAKLAND DR,       |
| <input checked="" type="radio"/> |                     | 131284               | KALAMAZOO PUBLIC SCHOOL DIST   | 1220 HOWARD ST,        |
| <input type="radio"/>            | 05678               | 56857                | LAKESIDE SCHOOL                | 3921 OAKLAND DR,       |
| <input type="radio"/>            | 05661               | 56815                | LAKEWOOD ELEMENTARY SCHOOL     | 3122 LAKE ST,          |
| <input type="radio"/>            | 05662               | 56842                | LINCOLN ELEMENTARY SCHOOL      | 912 N BURDICK ST,      |
| <input type="radio"/>            | 05663               | 56814                | LOY NORRIX SR HIGH SCHOOL      | 606 E KILGORE RD,      |
| <input type="radio"/>            | 05674               | 56834                | M L KING OF WESTWOOD ELEM SCH  | 1100 NICHOLS RD,       |
| <input type="radio"/>            | 05664               | 56810                | MILWOOD ELEMENTARY SCHOOL      | 3400 LOVERS LN,        |
| <input type="radio"/>            | 05665               | 56809                | MILWOOD MIDDLE SCHOOL          | 2916 KONKLE ST,        |
| <input type="radio"/>            | 05666               | 56799                | NORTHEASTERN ELEMENTARY SCHOOL | 2433 GERTRUDE ST,      |
| <input type="radio"/>            | 05667               | 56839                | NORTHGLADE ELEMENTARY SCHOOL   | 1914 COBB AVE,         |
| <input type="radio"/>            | 05668               | 56861                | OAKWOOD ELEMENTARY SCHOOL      | 3410 LAIRD AVE,        |
| <input type="radio"/>            | 05670               | 56807                | PARKWOOD-UPJOHN ELEM SCHOOL    | 2321 S PARK ST,        |
| <input type="radio"/>            | 05671               | 56854                | SOUTH MIDDLE SCHOOL            | 922 W MAPLE ST,        |
| <input type="radio"/>            | 05672               | 56827                | SPRING VALLEY ELEM SCHOOL      | 3530 MOUNT OLIVET RD,  |

|                       |       |       |                              |                    |
|-----------------------|-------|-------|------------------------------|--------------------|
| <input type="radio"/> | 00047 | 56849 | VINE STREET ALT HIGH SCHOOL  | 604 W VINE ST,     |
| <input type="radio"/> | 05673 | 56808 | WASHINGTON ELEMENTARY SCHOOL | 1919 PORTAGE ST,   |
| <input type="radio"/> | 05675 | 56855 | WINCHELL ELEMENTARY SCHOOL   | 2316 WINCHELL AVE, |
| <input type="radio"/> | 05669 | 56858 | WOODS LAKE ELEMENTARY SCHOOL | 3215 OAKLAND DR,   |
| <input type="radio"/> | 05676 | 56841 | WOODWARD ELEMENTARY SCHOOL   | 606 STUART AVE,    |

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### Schools and Libraries Universal Service Description of Services Requested and Certification Form

Estimated Average Burden Hours Per Response: 6.0 hours

This form is designed to help schools and libraries describe the eligible telecommunications-related services they seek so that this data can be posted on a website and interested service providers can identify the applicant as a potential customer and compete to serve it.

Please read instructions before completing

(To be completed by entity that will negotiate with Providers.)



|  |   |
|--|---|
| <b>1. Name of Applicant:</b><br>KALAMAZOO PUBLIC SCHOOL DIST | <b>2. Funding Year:</b><br>07/01/1999 - 06/30/2000 <input type="checkbox"/> |
|--|---|

**3a. NCES School Code (if individual school) Or NCES Library Code (if individual library)**  
State: 26 - District: 19950 - School/Library:

|  |   |
|--|---|
| <b>3b. Universal Service Control Number:</b><br>86603000011137 | <b>3c. Applicant ID Number:</b><br>131284 |
|--|---|

**4a. Type Of Applicant**  
(Check only one box.)

school

school district

library or library consortium under the LSTA

consortium of multiple entities

**4b. If Applicant is a consortium, check all other boxes that apply:**

|  |   |
|--|---|
| <input type="checkbox"/> includes non-governmental entities ineligible for support                                 | <input type="checkbox"/> state educational agency   |
| <input type="checkbox"/> entity desires separate bills for each member of consortium                               | <input type="checkbox"/> local educational agency   |
| <input type="checkbox"/> entity desires separate bills for some members of consortium                              | <input type="checkbox"/> educational service agency |
| <input type="checkbox"/> region of a state <input type="checkbox"/> statewide <input type="checkbox"/> multi-state |   |



**Street**  
1220 HOWARD ST

|                          |   |                                 |                                |
|--------------------------|---|---------------------------------|--------------------------------|
| <b>City</b><br>KALAMAZOO | <b>State</b><br>MI <input type="checkbox"/> | <b>Zip Code 5Digit</b><br>49008 | <b>Zip Code 4Digit</b><br>1871 |
|--------------------------|---|---------------------------------|--------------------------------|

|   |   |
|---|---|
| <b>Telephone number Ext:</b><br>(616) 3370139 | <b>E-mail Address</b><br>williams@kalamazoo.k12.mi.us |
|---|---|



**Street Address, P.O.Box, or Route Number (if different from Item 5)**

**Street**

|             |              |                        |                        |
|-------------|--------------|------------------------|------------------------|
| <b>City</b> | <b>State</b> | <b>Zip Code 5Digit</b> | <b>Zip Code 4Digit</b> |
|-------------|--------------|------------------------|------------------------|

Fill in all of the following (if available), and check the preferred mode of contact:

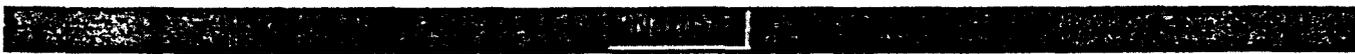
|  |  |   |                             |
|--|--|---|-----------------------------|
| <input type="radio"/> Telephone Number Ext:<br>(616) 33701 | <input checked="" type="radio"/> Fax Number Ext:<br>(616) 337019 | <input type="radio"/> E-mail address:<br>williams@kalamazoo | <input type="radio"/> Mail: |
|--|--|---|-----------------------------|

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**Please Record This USC Number For Future Reference:  
This Number Must Be Used To Complete Your Application,  
If You Leave This Process Before The Application Is Completed.**

**USCN: 866030000111137**



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### Schools and Libraries Universal Service Description of Services Requested and Certification Form

**Block 7 - Summary Description of Needs (SL-7) (RFP-7)**

|  |   |
|--|---|
| 7a. Number of students:<br>11279           | 7b. Number of library patrons:<br>      |
| 8. Number of buildings to be served:<br>27 | 9. Number of rooms to be served:<br>910 |

**Block 8 - Summary Description of Needs (SL-8) (RFP-8)**

10.  Check if applicant seeks discounts only for eligible services based on one or more existing, binding contract(s) and proceed to Block 4.

11.  Check here if you have a Request for Proposal(RFP) available. If RFP is posted on a website, provide the website \_\_\_\_\_

PREVIOUS    RETURN    NEXT

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### Schools and Libraries Universal Service Description of Services Requested and Certification Form



## 19. Eligible Entities

Please click on the Help button for specific instructions about completing this page



Select zero or more entities. You may do multiple searches to add all eligible billed entities on this ap

| Selection List   | Billed Entity(ies)   |
|--|--|
| <div style="border: 1px solid black; padding: 2px;"> <div style="background-color: black; color: white; padding: 2px;">&lt;select from list&gt;</div> <ul style="list-style-type: none"> <li>ARCADIA ELEMENTARY SCHOOL</li> <li>CENTRAL SR HIGH SCHOOL</li> <li>CHIME ELEMENTARY SCHOOL</li> <li>CONT EDUC FOR YOUNG FAMILIES</li> <li>EDISON ELEMENTARY SCHOOL</li> <li>GREENWOOD ELEMENTARY SCHOOL</li> <li>HILLSIDE JR HIGH SCHOOL</li> <li>INDIAN PRAIRIE ELEM SCHOOL</li> <li>JOHN F KENNEDY CENTER</li> </ul> </div> | <div style="border: 1px solid black; padding: 2px;"> <div style="background-color: black; color: white; padding: 2px;">&lt;select from list&gt;</div> <ul style="list-style-type: none"> <li>KALAMAZOO PUBLIC SCHOOL</li> </ul> </div> |
| <div style="display: flex; justify-content: space-around; width: 100%;"> <span>Add All &gt;&gt;</span> </div> <div style="display: flex; justify-content: space-around; width: 100%;"> <span>Add &gt;</span> </div> <div style="display: flex; justify-content: space-around; width: 100%;"> <span>&lt; Remove</span> </div> <div style="display: flex; justify-content: space-around; width: 100%;"> <span>&lt;&lt; Remove All</span> </div>  |  |

Check zero or more boxes where applicable. This option is **ONLY** for statewide applicants.

<Select from the list>

- All Public Schools in State
- All Private Schools in State
- All Public School Districts in State
- All Eligible Libraries in State

To add eligible entities not found in search, click NEXT and use the ADD NEW button.



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### Schools and Libraries Universal Service Description of Services Requested and Certification Form

#### QUALITY OF SERVICE

18. Although the following services and facilities are ineligible for support, they are usually necessary if schools and libraries are to make effective use of the eligible services requested in this application. (If your application is only for basic voice telephone service, check this box  and go to Item 19. Otherwise, you must check at least one box in each of the other lines. You may provide details for purchases being sought.)

|  |
|--|
| a. Desktop communications software: Software required <input type="checkbox"/> has been purchased; and/or <input type="checkbox"/> is being sought.  |
| b. Electrical systems: <input type="checkbox"/> adequate electrical capacity is in place or has already been arranged; and/or <input type="checkbox"/> upgrading for additional electrical capacity is being sought. |
| c. Computers: a sufficient quantity of computers <input type="checkbox"/> has been purchased; and/or <input type="checkbox"/> is being sought.   |
| d. Computer hardware maintenance: adequate arrangements <input type="checkbox"/> have been made; and/or <input type="checkbox"/> are being sought.   |
| e. Staff development: <input type="checkbox"/> all staff have had an appropriate level of training or additional training has already been scheduled; and/or <input type="checkbox"/> training is being sought.      |
| f. Additional details: Use this space to provide additional details to help providers to identify the services or facilities you desire.   |

Previous | First | Next | End

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### Schools and Libraries Universal Service Description of Services Requested and Certification Form

| (1)   | (2)<br>Existing<br>Services | (3)<br>Additional<br>Services<br>Desired | (4)<br>Total<br>Services<br>Desired | (5)<br>Details(Optional) |
|---|-----------------------------|--|-------------------------------------|--------------------------|
| <b>TELECOMMUNICATIONS PART</b>  |                             |  |                                     |                          |
| a. Number of phones that have or require service (See instructions concerning extension phones and fax machines.) | 850                         | 50                                       | 900                                 | Centrex an               |
| b. Number of computers that have or require service   |                             |  |                                     |                          |
| c. Number of high bandwidth video conferencing links  |                             |  |                                     |                          |
| d. Specify other (Optional)   |                             |  |                                     |                          |
| <b>INTERNET CONNECTIONS</b>   |                             |  |                                     |                          |
| a. Number of buildings with at least some rooms connected   |                             |  |                                     |                          |
| b. Number of rooms connected  |                             |  |                                     |                          |
| c. Highest Speed of connection  |                             |  |                                     |                          |
| d. Specify other (Optional)   |                             |  |                                     |                          |
| <b>DIAL UP SERVICES</b>   |                             |  |                                     |                          |
| a. Number of dial up connections necessary  |                             |  |                                     |                          |
| b. Highest speed of dial up connections   |                             |  |                                     |                          |
| c. Number of direct connections necessary   |                             |  |                                     |                          |
| d. Highest speed of such direct connections   |                             |  |                                     |                          |
| e. Specify other (Optional)   |                             |  |                                     |                          |

15. You may provide additional summary information about the services you are requesting to help service providers identify your needs more precisely. You may provide technical requirements or give an informal description of your telecommunications-related goals.

Centrex and POTS ▲

▼

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16.  Check here if there are any restrictions imposed by state or local laws or regulations on how and when providers may contact you or on other bidding procedures. Please describe below any such restrictions or procedures. You may attach restrictions or give website where they are posted.

▲

▼

---

17. Purchases in future years: If you have current plans to purchase additional services in future years, describe them below (Providing this information is optional.)

▲

▼



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Schools and Libraries Universal Service  
Description of Services Requested  
and Certification Form

# Eligible Entities

| Billed Entity                | Billed Entity's Zip code | Billed Entity code |
|------------------------------|--------------------------|--------------------|
| KALAMAZOO PUBLIC SCHOOL DIST | 49008                    | 131284             |

Add New



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### Schools and Libraries Universal Service Description of Services Requested and Certification Form

## 19. Eligible Entities

Please click on the Help button for specific instructions about completing this page

Select zero or more entities. You may do multiple searches to add all eligible billed entities on this ap

| Selection List  | Billed Entity(ies)   |
|---|--|
| <div style="border: 1px solid black; padding: 2px;"> <p>&lt;select from list&gt;</p> <p>ARCADIA ELEMENTARY SCHOOL</p> <p>CENTRAL SR HIGH SCHOOL</p> <p>CHIME ELEMENTARY SCHOOL</p> <p>CONT EDUC FOR YOUNG FAMILIES</p> <p>EDISON ELEMENTARY SCHOOL</p> <p>GREENWOOD ELEMENTARY SCHOOL</p> <p>HILLSIDE JR HIGH SCHOOL</p> <p>INDIAN PRAIRIE ELEM SCHOOL</p> <p>JOHN F KENNEDY CENTER</p> </div>  | <div style="border: 1px solid black; padding: 2px;"> <p>&lt;select from list&gt;</p> <p>KALAMAZOO PUBLIC SCHOOL</p> </div> |
| <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 0 auto;">Add All &gt;&gt;</div> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 2px auto;">Add &gt;</div> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 2px auto;">&lt; Remove</div> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 2px auto;">&lt;&lt; Remove All</div> |  |

Check zero or more boxes where applicable. This option is **ONLY** for statewide applicants.

- <Select from the list>
- All Public Schools in State
  - All Private Schools in State
  - All Public School Districts in State
  - All Eligible Libraries in State

To add eligible entities not found in search, click NEXT and use the ADD NEW button.



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### Schools and Libraries Universal Service Description of Services Requested and Certification Form

## 20. Entities Ineligible for Schools and Libraries Discount

Please click on the Help button for specific instructions about completing this page

---

Select zero or more entities. You may do multiple searches to add all ineligible entities on this application.

| Selection List       | Billed Ineligible Entity(ies) |
|----------------------|-------------------------------|
| <select from list> ▲ | <select from list> ▲          |
|                      | Add All >>                    |
|                      | Add >                         |
|                      | < Remove                      |
|                      | << Remove All                 |
| ▼                    | ▼                             |

To add ineligible entities not found in search, click NEXT and use the ADD NEW button.

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Schools and Libraries Universal Service  
Description of Services Requested  
and Certification Form

# Ineligible Entities

| Name of Entity | Contact Person | Contact Method | Contact Information |
|----------------|----------------|----------------|---------------------|
|----------------|----------------|----------------|---------------------|

Add New



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### Schools and Libraries Universal Service Description of Services Requested and Certification Form

- a.  schools under the statutory definitions of elementary and secondary schools found in the Elementary and Secondary Education Act of 1965, 20 U.S.C. Secs. 8801(14) and (25), that do not operate as for-profit businesses, and do not have endowments exceeding \$50 million; and/or
- b.  libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any school (including, but not limited to) elementary and secondary schools, colleges and universities.

- a.  individual technology plans and/or
- b.  higher-level technology plans for using the services requested in this application (if those services consist of other than voice services).

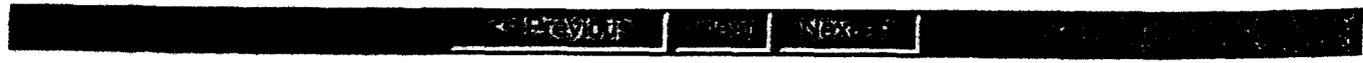
- a.  Technology plan(s) has/have been approved; or
- b.  Technology plan(s) will be approved by a state or other authorized body; or
- c.  Technology plan(s) will be submitted to Schools and Libraries Corporation for approval.

24.  I certify that the services the applicant purchases at discounts provided by 47 U.S.C. Sec. 254 will be used solely for educational purposes and will not be sold, resold, or transferred in consideration for money or any other thing of value.

25.  I recognize that support under this program is conditional upon the school(s) or library(ies) I represent securing access to all of the resources, including computers, training, software, maintenance, and electrical connections necessary to use the services purchased effectively.

26.  I certify that I am authorized to submit this request on behalf of the above-named applicant, that I have examined this request, and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

|  |                               |
|--|-------------------------------|
| 29. Printed name of authorized person      | Gary L. Start                 |
| 30. Title or position of authorized person | Asst. Supt. Business, Finance |



471

# Schools and Libraries Universal Service Services Ordered and Certification Form

Estimated Average Burden Hours Per Response: 6 hours

This form asks schools and libraries to list the eligible telecommunications-related services they have ordered and estimate the annual charges for them so that the Schools and Libraries Corporation can set aside sufficient support to reimburse providers for services.

Please read instructions before completing.

(To be completed by each Billed Entity)

**Block 1: Applicant Address and Identifications** (School, library, or consortium desiring Universal Service funding.)

|  |             |   |                                  |  |
|--|-------------|---|----------------------------------|--|
| 1. Name of Applicant (Billed Entity)<br>Kalamazoo Public Schools   |             | 2. Funding Year<br>July 1, 1999 - June 30, 2000   |                                  |  |
| 3a. NCES School Code (if individual school) or NCES Library Code (if individual library) 26-19950  |             |   |                                  |  |
| 4a. 471 Application Number (Administrator will insert this)  |             | 3c. Billed Entity Number<br>131284  |                                  |  |
| 4a. Type of Applicant<br>(Check only one box)<br><input type="checkbox"/> school<br><input checked="" type="checkbox"/> school district<br><input type="checkbox"/> library or library consortium under the LSTA<br><input type="checkbox"/> consortium of multiple entities               |             | 4b. If applicant is a consortium, check all other boxes that apply:<br><input type="checkbox"/> includes non-government entities ineligible for support<br><input type="checkbox"/> region of a state <input type="checkbox"/> statewide <input type="checkbox"/> multi-state<br><input type="checkbox"/> state educational agency<br><input type="checkbox"/> local educational agency<br><input type="checkbox"/> educational services agency |                                  |  |
| 5. Applicant's Street Address, P.O. Box, or Route Number<br>1220 Howard Street   |             |   |                                  |  |
| City<br>Kalamazoo  | State<br>MI | Zip Code<br>49008   | Telephone Number<br>616/337-0139 | E-mail Address<br>williamses@kalamazoo.k12.mi.us |
| 6. Contact Person's Name<br>Chris Williams   |             |   |                                  |  |
| Street Address, P.O. Box, or Route Number (if different from Item 5)   |             |   |                                  |  |
| City   | State       | Zip Code  |                                  |  |
| Fill in all of the following (if available), and check the preferred mode of contact: <input type="checkbox"/> Telephone 616/337-0139<br><input checked="" type="checkbox"/> FAX 616/337-0195 <input type="checkbox"/> E-mail williamses@kalamazoo.k12.mi.us <input type="checkbox"/> Mail |             |   |                                  |  |

**Block 2: Purpose of Request**

|  |  |
|--|--|
| 7 Purpose of Request: (Check all that apply, if any.)  |  |
| a. <input type="checkbox"/> Discount on contract(s) signed prior to a request being posted on the Administrator's website.<br>Was an FCC Form 470 filed with regard to all the contract(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| b. <input checked="" type="checkbox"/> Discount on contract(s) signed after a request being posted on the Administrator's website.   |  |
| c. <input type="checkbox"/> Minor modifications or supplement to existing contract(s) for which a Form 471 was already filed.<br>471 Application Number _____  |  |

**Block 3: Characteristics of Applicant and Applicant's Service Order** (derived from FCC Form 470 Blocks 2 & 3)

|   |   |
|---|---|
| 8a. Number of students<br>11,279          | 8b. Number of library patrons           |
| 9. Number of buildings to be served<br>27 | 10. Number of rooms to be served<br>910 |

Contact Person's Name **Chris Williams**

and Phone Number: **616/337-0139**

|  | Existing Services | Total Services After Order |
|--|-------------------|----------------------------|
| <b>11. Telecommunications Services</b>   |                   |                            |
| a. Number of phones that have or require service<br>(See instructions concerning extension phones and fax machines.) | 850               | 900                        |
| b. Number of computers that have or require service  |                   |                            |
| c. Number of high bandwidth video conferencing links   |                   |                            |
| <b>12. Internal Connections</b>  |                   |                            |
| a. Number of buildings with at least some rooms connected  |                   |                            |
| b. Number of rooms connected   |                   |                            |
| c. Highest speed of connection   |                   |                            |
| <b>13. Internet Access</b>   |                   |                            |
| a. Number of dial up connections   |                   |                            |
| b. Highest speed of such dial up connections   |                   |                            |
| c. Number of direct connections  |                   |                            |
| d. Highest speed of such direct connections  |                   |                            |

**Block 4: Determining Discount Percentage**

14. Fill in one line per school, library, or library consortium and calculate in the last line, an average discount rate for the billed entity. Attach additional pages if necessary. *Note:* If the applicant has already completed this chart for all of the same entities with data that is current, provide the "471 Application Number" (Item 3b), from that previous FCC Form 471 here:

| (1)<br>Name of Individual School or Library  | (2)<br>NCES or Comparable Code for School or Library (Obtain from Administrator) | (3)<br>Urban or Rural | (4)<br><i>For Schools:</i><br>Number of Students<br><i>For Libraries:</i><br>NCES Code of a School in its District | (5)<br><i>For Schools:</i><br>Number of Students Eligible for National School Lunch Program | (6)<br>Discount Calculated from Discount Matrix | (7)<br>Check if School or Library will use "Shared Services" listed in Item 15. |
|--|--|-----------------------|--|---|---|---|
| Please see Section 14 attachments following  |  |                       |  |   |   | [ ]   |
|  |  |                       |  |   |   | [ ]   |
|  |  |                       |  |   |   | [ ]   |
|  |  |                       |  |   |   | [ ]   |
|  |  |                       |  |   |   | [ ]   |
| <b>FOR SHARED SERVICES ORDERED BY BILLED ENTITY (attach worksheet of calculations)</b> |  |                       |  |   |   |   |

**Block 4: Determining Discount Percentages**

14. Fill in one line per school, library, or library consortium and calculate in the last line, an average discount rate for the billed entity.

Attach additional pages if necessary. Note: If the applicant has already completed this chart for all of the same entities with data that is current, provide the "471 Application Number" (Item 3b), from that previous FCC Form 471 here: \_\_\_\_\_

| (1)<br>Name of Individual<br>School or Library                                  | (2)<br>NCES<br>Comparable<br>Code for School<br>or Library<br>(Obtain from<br>Administrator) | (3)<br>Urban<br>or<br>Rural | (4)<br><i>For Schools:</i><br>Number of<br>Students<br><i>For Libraries:</i><br>NCES Code of a<br>School in its<br>District | (5)<br><i>For Schools:</i><br>Number of<br>Students<br>Eligible for<br>National School<br>Lunch Program | (6)<br>Discount<br>Calculated<br>from<br>Discount<br>Matrix | (7)<br>Check if<br>School or<br>Library will<br>use "Shared<br>Services"<br>listed in<br>Item 15. |
|---|--|-----------------------------|---|---|---|---|
| Arcadia   | 05653  | Urban                       | 304   | 190   | 80%   | X   |
| Chime   | 05655  | Urban                       | 317   | 139   | 60%   | X   |
| Edison  | 05656  | Urban                       | 441   | 412   | 90%   | X   |
| Greenwood   | 05657  | Urban                       | 145   | 100   | 80%   | X   |
| Indian Prairie  | 05659  | Urban                       | 200   | 78  | 60%   | X   |
| King-Westwood   | 05674  | Urban                       | 487   | 202   | 60%   | X   |
| Lakewood  | 05661  | Urban                       | 114   | 99  | 90%   | X   |
| Lincoln   | 05662  | Urban                       | 628   | 356   | 80%   | X   |
| Milwood   | 05664  | Urban                       | 625   | 415   | 80%   | X   |
| Northeastern  | 05666  | Urban                       | 462   | 348   | 90%   | X   |
| Northglade  | 05667  | Urban                       | 357   | 206   | 80%   | X   |
| Oakwood   | 05668  | Urban                       | 151   | 92  | 80%   | X   |
| Parkwood-Upjohn   | 05670  | Urban                       | 464   | 251   | 80%   | X   |
| Spring Valley   | 05672  | Urban                       | 372   | 256   | 80%   | X   |
| Washington  | 05673  | Urban                       | 330   | 283   | 90%   | X   |
| Winchell  | 05674  | Urban                       | 404   | 225   | 80%   | X   |
| Woods Lake  | 05669  | Urban                       | 464   | 330   | 80%   | X   |
| Woodward  | 05676  | Urban                       | 313   | 246   | 90%   | X   |
| Hillside  | 05658  | Urban                       | 653   | 285   | 60%   | X   |
| Milwood Middle  | 05665  | Urban                       | 590   | 365   | 80%   | X   |
| South   | 05671  | Urban                       | 487   | 303   | 80%   | X   |
| Kalamazoo Central   | 05677  | Urban                       | 1324  | 435   | 50%   | X   |
| Loy Norrix  | 05663  | Urban                       | 1301  | 571   | 60%   | X   |
| CEYF  | 00048  | Urban                       | 62  | 50  | 90%   | X   |
| Phoenix   | 00160  | Urban                       | 135   | 70  | 80%   | X   |
| Vine  | 00047  | Urban                       | 149   | 90  | 80%   | X   |
| FOR SHARED SERVICES ORDERED BY BILLED ENTITY (attach worksheet of calculations) |  |                             |   |   | 80%   |   |

**Block 4: Determining Discount Percentages**

14. Fill in one line per school, library, or library consortium and calculate in the last line, an average discount rate for the billed entity. Attach additional pages if necessary. Note: If the applicant has already completed this chart for all of the same entities with data that is current, provide the "471 Application Number" (Item 3b \_\_\_\_\_)

| (1)<br>Name of Individual<br>School or Library | (2)<br>NCES<br>Comparable<br>Code for School<br>or Library<br>(Obtain from<br>Administrator) | (3)<br>Urban<br>or<br>Rural | (4)<br><i>For Schools:</i><br>Number of<br>Students<br><i>For Libraries:</i><br>NCES Code of a<br>School in its<br>District | (5)<br><i>For Schools:</i><br>Number of<br>Students<br>Eligible for<br>National School<br>Lunch Program | (6)<br>Discount<br>Calculated<br>from<br>Discount<br>Matrix | (7)<br>Check if<br>School or<br>Library will<br>use "Shared<br>Services"<br>listed in<br>Item 15. |
|--|--|-----------------------------|---|---|---|---|
| Kennedy  | 05660  | Urban                       | 0   | 0   | 0%  | [X]   |

| Kalamazoo Public Schools                          |               |                    |                        |   |  |                                     |                            |
|---|---------------|--------------------|------------------------|---|--|-------------------------------------|----------------------------|
| Item 14 Bottom Row Discount Calculation Worksheet |               |                    |                        |   |  |                                     |                            |
| (1) Name of Individual School or Library          | (2) NCES Code | (3) Urban or Rural | (4) Number of Students | (5) Number of Students Eligible for National School Lunch Program | Percent Eligible for National School Lunch Program | (6) Discount Calculated from Matrix | # Students x Discount Rate |
| Arcadia   | 05653         | Urban              | 304                    | 190   | 63%  | 80%                                 | 243                        |
| Chime   | 05655         | Urban              | 317                    | 139   | 44%  | 60%                                 | 190                        |
| Edison  | 05656         | Urban              | 441                    | 412   | 93%  | 90%                                 | 397                        |
| Greenwood   | 05657         | Urban              | 145                    | 100   | 69%  | 80%                                 | 116                        |
| Indian Prairie                                    | 05659         | Urban              | 200                    | 78  | 39%  | 60%                                 | 120                        |
| King-Westwood                                     | 05674         | Urban              | 487                    | 202   | 41%  | 60%                                 | 292                        |
| Lakewood  | 05661         | Urban              | 114                    | 99  | 87%  | 90%                                 | 103                        |
| Lincoln   | 05662         | Urban              | 628                    | 356   | 57%  | 80%                                 | 502                        |
| Milwood   | 05664         | Urban              | 625                    | 415   | 66%  | 80%                                 | 500                        |
| Northeastern                                      | 05666         | Urban              | 462                    | 348   | 75%  | 90%                                 | 416                        |
| Northglade  | 05667         | Urban              | 357                    | 206   | 58%  | 80%                                 | 286                        |
| Oakwood   | 05668         | Urban              | 151                    | 92  | 61%  | 80%                                 | 121                        |
| Parkwood-Upjohn                                   | 05670         | Urban              | 464                    | 251   | 54%  | 80%                                 | 371                        |
| Spring Valley                                     | 05672         | Urban              | 372                    | 256   | 69%  | 80%                                 | 298                        |
| Washington  | 05673         | Urban              | 330                    | 283   | 86%  | 90%                                 | 297                        |
| Winchell  | 05674         | Urban              | 404                    | 225   | 56%  | 80%                                 | 323                        |
| Woods Lake  | 05669         | Urban              | 464                    | 330   | 71%  | 80%                                 | 371                        |
| Woodward  | 05676         | Urban              | 313                    | 246   | 79%  | 90%                                 | 282                        |
| Hillside  | 05658         | Urban              | 653                    | 285   | 44%  | 60%                                 | 392                        |
| Milwood Middle                                    | 05665         | Urban              | 590                    | 365   | 62%  | 80%                                 | 472                        |
| South   | 05671         | Urban              | 487                    | 303   | 62%  | 80%                                 | 390                        |
| Kalamazoo Central                                 | 05677         | Urban              | 1324                   | 435   | 33%  | 50%                                 | 662                        |
| Loy Norrix  | 05663         | Urban              | 1301                   | 571   | 44%  | 60%                                 | 781                        |
| CEYF  | 00048         | Urban              | 62                     | 50  | 81%  | 90%                                 | 56                         |
| Phoenix   | 00160         | Urban              | 135                    | 70  | 52%  | 80%                                 | 108                        |
| Vine  | 00047         | Urban              | 149                    | 90  | 60%  | 80%                                 | 119                        |
| Kennedy   | 05660         | Urban              | 0                      | 0   | 0%   | 0%                                  | 0                          |
| <b>District Total</b>                             |               | <b>Urban</b>       | <b>11279</b>           | <b>6397</b>   | <b>57%</b>   | <b>80%</b>                          | <b>8207</b>                |
| <b>Total Eligible Students in All Schools</b>     |               |                    | <b>8207</b>            |   |  |                                     |                            |
| <b>Divided by Total Students</b>                  |               |                    | <b>11279</b>           |   |  |                                     |                            |
| <b>Percentage Eligible</b>                        |               |                    | <b>73%</b>             |   |  |                                     |                            |
| <b>District-Wide USF Discount Rate</b>            |               |                    | <b>80%</b>             |   |  |                                     |                            |

Contact Person's Name Chris Williams

and Phone Number: 616/337-0139

**Block 5: Services Ordered**

15. "Shared" services: All EXCEPT site-specific, internal connections and dedicated ("private line") connections from only one school or library to an ISP or other end user.

| (1)<br>SLC Service<br>Provider<br>Number or Full<br>Legal Name of<br>Service<br>Provider | (2)<br>Universal<br>Service<br>Control<br>Number for<br>Form 470 on<br>which this is<br>based | CONTRACT  |                      |                                | (6)<br>Services or Products   | (7)<br>Service<br>Start Date | Amount   |   | (10)<br>Estimated<br>Total<br>Annual<br>Prediscount<br>Cost | (11)<br>Percentage<br>Discount<br>(from Item 14) |
|--|---|---|----------------------|--------------------------------|-------------------------------|------------------------------|--|---|---|--|
|  |   | (3)<br>Contract<br>Number<br>(if<br>applicable) | (4)<br>Award<br>Date | (5)<br>Expir-<br>ation<br>Date |                               |                              | (8)<br>Estimated<br>One Time<br>Pre-<br>discount<br>Cost | (9)<br>Estimated<br>Monthly<br>Pre-<br>discount<br>Cost |   |  |
| 143001262  | 544280000141904   | T   | T                    | T                              | Telecommunications Services   | 07/01/99                     | N/A  | \$2,000.00  | \$24,000.00   | 80.00%   |
|  |   |   |                      |                                | Internet Access               |                              |  |   |   |  |
|  |   |   |                      |                                | Internal Connections (Shared) |                              |  |   |   |  |
| 143001727  | 866030000111137   | T   | T                    | T                              | Telecommunications Services   | 07/01/99                     | N/A  | \$27,000.00   | \$324,000.00  | 80.00%   |
|  |   |   |                      |                                | Internet Access               |                              |  |   |   |  |
|  |   |   |                      |                                | Internal Connections (Shared) |                              |  |   |   |  |
|  |   |   |                      |                                | Telecommunications Services   |                              |  |   |   |  |
|  |   |   |                      |                                | Internet Access               |                              |  |   |   |  |
|  |   |   |                      |                                | Internal Connections (Shared) |                              |  |   |   |  |

Contact Person's Name Chris Williams and Phone Number: 616/337-0139

17.  Check this box to confirm that, for each service provider listed in 15 and 16, above, a list is attached (as an appendix to this form) of all of the services that each service provider is providing to the billed entity. Service providers should provide these lists on request.

18. a. Total dollars of support allocated for this application for the entire funding year (calculated by administrator)

b. Amounts of support set aside for this application for the first six months of the year (calculated by administrator)

19. Provide the total estimated cost (pre-discount price) for the services you expect to order in the funding year following the one for which you are applying here. (This figure is not binding.)

20. Is your order solely for basic telephone service?  Yes  No

**Block 6: Certification and Signature**

21. The applicant is eligible for support because it includes: (Check one or both.)

a.  schools under the statutory definitions of elementary and secondary schools found in the Elementary and Secondary Education Act of 1965, 20 U.S.C. Secs. 8801 (14) and (25), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million; and/or

b.  libraries or library consortia eligible for assistance from a state library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any schools', including, but not limited to, elementary and secondary schools, colleges, or universities.

22. The school(s) or library(ies) I represent have secured access to all of the resources, including computers, training, software, maintenance, and electrical connections necessary to make effective use of the services purchased as well as to pay the discounted charges for eligible services.

23. All of the individual schools, libraries, and library consortia listed above in items 15 and 16 are covered by:

a.  an individual; and/or

b.  higher-level technology plan(s) for using the services requested in this application (if those services consist of other than voice services).

24. Status of technology plans (check one):

a.  Technology plan(s) has/have been approved; or

b.  Technology plan(s) will be approved by a state or other authorized body; or

c.  Technology plan(s) will be submitted to Schools and Libraries Corporation for approval.

25. I certify that the entities eligible for support that I am representing have complied with all applicable state and local laws regarding procurements of services for which support is being sought.

26. I certify that the services the applicant purchases at discounts provided by 47 U.S.C. Sec. 254 will be used solely for educational purposes and will not be sold, resold, or transferred in consideration for money or any other thing of value.

27. I understand that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the service receive an appropriate share of benefits from those services.

28. I recognize that I may be audited pursuant to this application and will retain for five years any and all worksheets and other records that I rely upon to fill out this application.

29. I certify that I am authorized to submit this request on behalf of the above-named institution, that I have examined this request and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

30. Signature

31. Date 03/26/99

32. Printed name of authorized person Gary Start

33. Title or position of authorized person Assistant Superintendent for Business & Finance

**Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec.1001.**

NOTICE TO INDIVIDUALS: Section 54.504 of the Federal Communication Commission's rules requires all schools and libraries ordering services that are eligible for and seeking universal service discounts to file this Services Ordered and Certification Form (FCC Form 471) with the Universal Service Administrator 47 C.F.R. § 54.504. The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47 C.F.R. § 54.504. All schools and libraries planning to order services eligible for universal service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of a FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party of a proceeding before the body or has an interest in the proceeding.

If you owe a past due debt to the federal government, the taxpayer identification number (such as your social security number) and other information you provide may also be disclosed to the Department of the Treasury Financial Management Service, other federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide this information to these agencies through the matching of computer records when authorized.

With the exception of your social security number, if you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Privacy Act of 1974, Pub. L. No. 93-579, December 31, 1974, 5 U.S.C. § 552, and the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, *et seq.*

Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, D.C. 20554.

This form should be submitted to: **Schools and Libraries Corporation**  
**P.O. Box 4217**  
**Iowa City, Iowa 52244-4217**  
**1-888-203-8100**

**AMERITECH**  
**Centrex Service Pricing Sheet**  
**SPIN 143001727**

Customer orders and Ameritech agrees to provide the following Centrex service:

**Service Term Selected:**                    **60 Months**

| <u>Quantity</u>  | <u>Description</u>                                       | <u>Nonrecurring Charge</u> | <u>Cumulative Nonrecurring Charge</u> | <u>Monthly Rate</u> | <u>Cumulative Monthly Rate</u> |
|--|--|----------------------------|---------------------------------------|---------------------|--------------------------------|
| 1  | System Charge - Establishment/Conversion                 | 35.00                      | \$ 35.00                              | 20.00               | \$ 20.00                       |
| -----  | Per Line Connection                                      | @ \$ 42.00                 | \$ _____                              |                     |                                |
|  | <b><u>Exchange Access</u></b>                            |                            |                                       |                     |                                |
|  | Per Line Exchange Access                                 |                            |                                       |                     |                                |
| <u>25</u>  | Lines 1 thru 25  |                            |                                       | @ \$ 10.03          | \$ <u>250.75</u>               |
| <u>174</u>   | Lines 26 thru 199  |                            |                                       | @ \$ 6.32           | \$ <u>1099.68</u>              |
| <u>300</u>   | Lines 200 thru 499                                       |                            |                                       | @ \$ 5.49           | \$ <u>1647.00</u>              |
| <u>282</u>   | Lines 500 thru 999                                       |                            |                                       | @ \$ 4.57           | \$ <u>1288.74</u>              |
| -----  | Lines 1,000 -  |                            |                                       | @ \$ 3.59           | \$ _____                       |
|  | <b><u>Standard Centrex Line</u></b>                      |                            |                                       |                     |                                |
| <u>680</u>   | Per Centrex Intercommunications                          |                            |                                       | @ \$ 2.36           | \$ <u>1604.80</u>              |
|  | <b><u>Electronic Key Line (EKL) (DMS 100 only)*</u></b>  |                            |                                       |                     |                                |
| <u>101</u>   | Per EKL Intercommunications:                             | @ \$ 15.00                 | \$ _____                              | @ \$ 5.36           | \$ <u>541.36</u>               |
|  | <b><u>Integrated Services Digital Network (ISDN)</u></b> |                            |                                       |                     |                                |
| -----  | Per ISDN Intercom (Custom):                              | @ \$ 225.00                | \$ _____                              | @ \$ _____          | \$ _____                       |
| -----  | Per ISDN Intercom (National):                            | @ \$ 225.00                | \$ _____                              | @ \$ _____          | \$ _____                       |
| ISDN "B" and "D" Channel Applications must also be ordered in the Option al Feature Section. |  |                            |                                       |                     |                                |
| A.   | Total Monthly and Nonrecurring Centrex Charges           |                            | \$ <u>35.00</u>                       |                     | \$ <u>6452.33</u>              |

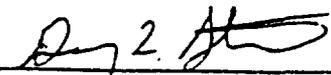
In Addition to the above Centrex rates, you will be billed the then prevailing end-user Federal Access Line Charge authorized in the tariffs.

The following basic features are available with EKL where facilities permit at no additional charge:

- |                                 |  |
|---------------------------------|--|
| Analog Line Pickups             | Leave Message Activation                   |
| Automatic dial                  | Listen On Hold                             |
| Automatic Line Preselect        | Make Set Busy                              |
| Blind Transfer With Recall Id   | Make Set Busy Except w/Group Intercom      |
| Bridging                        | Message Retrieval Display                  |
| Call Forwarding Per Key         | Message Waiting Activation Control         |
| Call Request                    | Message Waiting Indication Visual          |
| Call Request w/Queue            | Multiple Appearance Directory Number (SCA) |
| Calling Number display          | On Hook Dialing                            |
| Calling Number display Intercom | Repeat Alert                               |
| Calling Reason Display          | Ringing Options for MADN                   |
| Display Capability              | Secondary MADN Call Forward                |
| Executive Busy Override         | Set Inspect                                |
| Executive Busy Override Exempt  | Short Hunt                                 |
| Feature Buttons                 | Stop Hunt-Access Code                      |
| Group Intercom                  | Time and Date Display                      |
| Last Number Redial              | Time and Date Display                      |

You have also ordered the following optional feature(s) which will be provided where facilities permit. The current prevailing rates and charges are:

|  | <u>Optional Features</u> | <u>Nonrecurring Charge</u> | <u>Cumulative Nonrecurring Charge</u> | <u>Monthly Rate</u> | <u>Cumulative Monthly Rate</u> |
|--|--------------------------|----------------------------|---------------------------------------|---------------------|--------------------------------|
| 700                                    | PREMIUM FEATURE PKG      | @ _____                    | \$ _____                              | @ 1.00              | \$ 700.00                      |
| 5                                      | SPEED CALLING LONG LIST  | @ _____                    | \$ _____                              | @ .40               | \$ 2.00                        |
| 1                                      | 6 PORT CONFERENCE CKT    | @ _____                    | \$ _____                              | @ 57.50             | \$ 57.50                       |
| 1                                      | SMDR -                   | @ _____                    | \$ _____                              | @ 60.00             | \$ 60.00                       |
| 59<br>MAD                              | MADN                     | @ _____                    | \$ _____                              | @ .25               | \$ 14.75                       |
| 44                                     | SECONDARY NUMBERS        | @ _____                    | \$ _____                              | @ 1.20              | \$ 52.80                       |
| -----                                  |                          | @ _____                    | \$ _____                              | @ _____             | \$ _____                       |
| -----                                  |                          | @ _____                    | \$ _____                              | @ _____             | \$ _____                       |
| -----                                  |                          | @ _____                    | \$ _____                              | @ _____             | \$ _____                       |
| -----                                  |                          | @ _____                    | \$ _____                              | @ _____             | \$ _____                       |
| B. Total Centrex Optional Feature      |                          |                            | \$ _____                              |                     | \$ 887.05                      |
| Nonrecurring Charges and Monthly Rates |                          |                            |                                       |                     |                                |
| Centrex Grand Total                    |                          |                            | \$ _____                              |                     | \$ 7339.38                     |

 1/5/98  
(Signature and Date)

# Qwest

Spin H 143001262

## Monthly Statement

### Invoice

Primary Customer: KALAMAZOO PUBLIC SCHOOLS  
Primary Account: 30131488  
Primary Phone: 616-337-0000

Period Ending: 12/07/98  
Cycle: 23-63  
Invoice Number: 81700330-6237

### Grand Totals

Total Current Charges  
Previous Balances  
Payments

## RECEIVED

\$2,657.68  
~~8,463.11~~  
~~(3,234.50)~~

AMOUNT DUE

DEC 14 1998

~~\$5,886.29~~

Facilities Management

Thank you for selecting Qwest as your long distance company. It is a pleasure to serve you. If you have any questions regarding your bill, or any other aspect of your service, please call customer service.

#### Qwest Calling Key

- O Call is subject to Operator Surcharge
- F Call is subject to Payphone Surcharge
- B Call is subject to Operator Surcharge and Payphone Surcharge

Messages Continue on next Page

Please See Reverse Side For Remittance Address

Keep this portion for your records.

Please detach and mail this portion with your payment in the enclosed envelope.

### Business Services Remittance

Account Number: 30131488

616-337-0000

Invoice Number: 817003307

Period Ending: 12/07/98

Amount Due:

\$5,886.29

Amount Paid:

2657.68

817003307301314880001000000100000023004349008000000005886292

800098 1223 .12 2301-0001-000927  
KALAMAZOO PUBLIC SCHOOLS  
600 W VINE ST  
KALAMAZOO MI 49008

Payment Due Upon Receipt

**Qwest.**

Page : 3

Invoice Number : 817003307

Primary Account Name : KALAMAZOO PUBLIC SCHOOLS  
 Primary Account Number : 30131488  
 Primary Telephone Number : 616-337-0000 Ending : 12/07/98

**Invoice Detail****Primary Account Number 30131488**

KALAMAZOO PUBLIC SCHOOLS  
 600 W VINE ST  
 KALAMAZOO MI 49008  
 Main Telephone Number: 616-337-0000

|              |   |            |
|--------------|---|------------|
| 12/07 210367 | KALAMAZOO PUBLIC SCHOOLS - Q.guaranteed | \$2,630.89 |
| 12/07        | Universal Service Fund                  | 26.79      |
|              | Current Charges                         | 2,657.68   |
|              | Previous Balance                        | 6,463.11   |
| 11/13        | Payment                                 | (3,234.50) |
| 12/07        | Net Total for Account 30131488          | \$5,886.29 |

**Grand Totals**

|                              |            |
|------------------------------|------------|
| Total Charges before Taxes   | \$2,630.89 |
| Total Universal Service Fund | 26.79      |
|                              | -----      |
| Total Current Charges        | \$2,657.68 |
| Previous Balances            | 6,463.11   |
| Payments                     | (3,234.50) |
|                              | -----      |
| Amount Due                   | \$5,886.29 |



UNIVERSAL SERVICE  
ADMINISTRATIVE CO

SCHOOLS AND LIBRARIES DIVISION

Box 125 - Correspondence Unit

100 South Jefferson Road

Whippany, NJ 07981

KALAMAZOO PUBLIC SCHOOL DIST  
CHRIS WILLIAMS  
1220 HOWARD ST  
KALAMAZOO MI 49008-1871

July 8, 1999

Re: Form 471 Application Number: 136540  
Funding Year: 07/01/1999 - 06/30/2000  
Billed Entity Number: 131284

Thank you for your 1999-2000 E-rate application and for any assistance you provided throughout our review. We have completed processing of your Form 471. This letter is to advise you of our decisions.

#### FUNDING COMMITMENT REPORT

From your Form 471, we reviewed row-by-row discount requests in Items 15 and 16. We assigned each row a Funding Request Number (FRN). On the pages following this letter, we have provided a Funding Commitment Report for each FRN in your application.

Attached to this letter you will find a guide that defines each line of the Funding Commitment Report and a complete list of FRNs from your application. The SLD is also sending this information to your service provider(s) so arrangements can be made to begin implementing your E-rate discount(s). We would encourage you to contact your service providers to let them know your plans regarding these services.

#### FOR QUESTIONS

If you have questions regarding our decisions on your E-rate application, please notify us in writing. Your questions should be sent to: Questions, Schools and Libraries Division, Universal Service Administrative Company, Box 125 - Correspondence Unit, 100 South Jefferson Road, Whippany, NJ 07981.

#### FOR APPEALS

If you wish to appeal to the SLD, your appeal must be made in writing and received by us within 30 days of issuance of this letter as indicated by its postmark. In your letter of appeal, please include: correct contact information for the appellant, information on the Funding Commitment Decision you are appealing and the specific Funding Request Number in question, and an original authorized signature. Appeals sent by fax, e-mail or phone call cannot be processed. Please mail your appeal to: Letter of Appeal, Schools and Libraries Division, Box 125 - Correspondence Unit, 100 South Jefferson Road, Whippany, NJ 07981. You may also call our Client Service Bureau at 888-203-8100. While we encourage you to resolve your appeal with the SLD first, you have the option of filing an appeal directly with the Federal Communications Commission (FCC): FCC, Office of the Secretary, 445 12th Street SW, Room TW-A 325, Washington, D.C. 20554.

#### NEXT STEPS

Once you have reviewed this letter and have determined that some or all of your requests have been funded, your next step is to complete and submit the enclosed FCC Form 486. This Form notifies the SLD that you are currently receiving or have begun receiving services approved for discounts and provides certified indication that your technology plan(s) has been approved. As you complete your Form 486, you should also contact your service provider to verify they have received notice from the SLD of your commitments. After the SLD processes your Form 486, we can begin processing invoices from your service provider(s) so they can be reimbursed for discounted services they have provided you. For further detailed information on next steps, please review all enclosures.

POST-COMMITMENT REMINDER

\_\_\_\_\_ We would like to remind you that all approved applicants are subject to post-  
\_\_\_\_\_ funding commitment audits and other reviews by the SLD to assure that the discounts  
\_\_\_\_\_ ARE BEING USED in compliance with the program rules. Any applicant that is found  
\_\_\_\_\_ to have violated program rules will be subject to enforcement activities and  
other means of recourse by the SLD and other appropriate Federal, State and local  
authorities.

\_\_\_\_\_ We look forward to continuing our work with you on connecting our schools and  
\_\_\_\_\_ libraries together through communications.

Sincerely,  
Kate L. Moore  
President, Schools and Libraries Division, USAC

Enclosures

## EXPLANATION OF A FUNDING COMMITMENT REPORT

Attached to this letter will be a report for each approved E-rate funding request from your application. We are providing the following definitions.

- \* **FUNDING REQUEST NUMBER (FRN):** A Funding Request Number is assigned by the SLD to each line completed in Items 15 and 16 of your Form 471 once an application has been processed. This number is used to report to applicants and vendors the status of individual discount requests submitted on a Form 471. Applicants and vendors learned about FRNs when they received their Receipt Acknowledgement Letter and must use these numbers when completing the Form 486 and Invoices. An FRN will never be longer than 10 digits. If a FRN is shorter than 10 digits, applicants are advised to add zeroes to the front of the numbers to reach 10 digits when filing post-commitment forms.
- \* **FUNDING STATUS:** Each FRN will have one of six definitions: "Funded", "Denied", "Partially Funded", "Funds Exhausted", "Unfunded", or "As Yet Unfunded". An FRN that is "Funded" will be approved at the level that SLD determined is appropriate for that item. That will generally be the level requested by you unless the SLD determines during the application review process that some adjustment is appropriate, for example, a different discount percentage for that FRN than the Form 471 featured. A "Denied" FRN is one for which no funds will be committed, and the reason for that decision will be briefly explained in the "Funding Commitment Decision", and amplification of that explanation may be offered in the section, "Funding Commitment Decision Explanation". In accordance with FCC program rules, FRNs are "Partially Funded" or "Unfunded", if the total amount of funds in the Universal Service Fund is insufficient to fully fund or fund all approved requests. If the Form 471 was received after all the funds in the Universal Service Fund were allocated and it was processed, the status will indicate "Unfunded - Funds Exhausted". "As Yet Unfunded" is a temporary status that would be assigned to an FRN when the SLD is uncertain at the time the letter is generated whether there will be sufficient funds to make commitments for a particular service type at a particular discount level. For example, if your application included both telecommunications services and internal connections, you might receive a letter with our funding commitment for your telecommunications requests and a message that your internal connections requests are "As Yet Unfunded". You would then receive a later letter regarding our funding decision on your internal connections requests.
- \* **SPIN (Service Provider Identification Number):** A unique number assigned by the Universal Service Administrative Company to vendors seeking payment from the Universal Service Fund for participating in the universal service support programs. A SPIN contains 9 digits and should be included by applicants on their completed Form 471 applications. A SPIN is also used to verify delivery of services and to arrange for payment.
- \* **SERVICE PROVIDER NAME:** The legal name of the service provider.
- \* **PROVIDER CONTRACT NUMBER:** The number of the contract between the eligible party and the service provider. This will be present only if a contract number was provided on Form 471.
- \* **SERVICES ORDERED:** The type of service ordered from the service provider, as shown on Form 471.
- \* **EARLIEST POSSIBLE EFFECTIVE DATE OF DISCOUNT:** The first possible date of service for which the SLD will reimburse service providers for the discounts for the service. Note: If the actual service start date provided on a Form 486 is later than this date, the actual service start date set forth in the Form 486 will be the effective date of the discount.
- \* **CONTRACT EXPIRATION DATE:** The date the contract expires. This will be present only if a contract expiration date was provided on Form 471. This is not applicable for tariff services.
- \* **SITE IDENTIFIER:** This will appear only for FRNs listed in Item 16 of your Form 471. For public schools, the 12-digit NCES code you listed in Item 14 for this school site will appear here. If there is no NCES Code for an FRN in Item 16, the SLD-assigned entity number will appear here.
- \* **PRE-DISCOUNT COST:** Amount in Column 10 of Item 15/16, Form 471, as determined through the application review process. Please note that, during the Problem Resolution process at SLD, the amount in Col. 10 of Item 15/16 may have been corrected to conform to the information provided about Service Start Date and

Monthly Costs.

- \* DISCOUNT PERCENTAGE APPROVED BY THE SLD: This is the discount rate that the SLD has approved for this service.
- \* FUNDING COMMITMENT DECISION: This represents the total amount of funding that the SLD is now reserving to reimburse service providers for the discounts for this service through June 30, 2000. This figure may be different from the Estimated Total Annual Pre-Discount Cost (Col. 10 of Item 15/16) times the Percentage Discount (Col. 11 of Item 15/16) in the 471 application. It may be lower because of an adjustment determined appropriate by the SLD, such as of the discount percentage, or a denial of discounts and, if so, the accompanying comment will explain this difference. The difference may also reflect a reduction from the request level made necessary by overall funding limitations, in which case the "Funding Status" above will indicate "Partially Funded" or "Unfunded". Whatever amount is listed here, it is important that you and the service provider both recognize that the SLD should be invoiced and the SLD may direct disbursement of discounts on only eligible, approved services actually rendered.
- \* FUNDING COMMITMENT DECISION EXPLANATION: This entry may appear to amplify the comment in the "Funding Commitment Decision", if the discount request for this service is denied for reasons other than "Unfunded" or if the SLD determined that some adjustment to the request level was appropriate.

FUNDING COMMITMENT REPORT FOR APPLICATION NUMBER: 0000136540

— Funding Request Number: 0000205028 Funding Status: Funded  
— SPIN: 143001727 Service Provider Name: Ameritech-Michigan (aka Michigan Bell Telepho  
— Provider Contract Number: T  
— Services Ordered: Telecommunications Services  
— Earliest Possible Effective Date of Discount: 07/01/1999  
— Contract Expiration Date: N/A  
— Pre-discount Cost: \$324,000.00  
— Discount Percentage Approved by the SLD: 80%  
— Funding Commitment Decision: \$259,200.00 - 471 approved as submitted

Funding Request Number: 0000205046 Funding Status: Funded  
SPIN: 143001262 Service Provider Name: LCI International Telecom Corp.  
Provider Contract Number: T  
Services Ordered: Telecommunications Services  
Earliest Possible Effective Date of Discount: 07/01/1999  
Contract Expiration Date: N/A  
Pre-discount Cost: \$24,000.00  
Discount Percentage Approved by the SLD: 80%  
Funding Commitment Decision: \$19,200.00 - 471 approved as submitted

HOME CANCEL HELP

# FCC Form 471

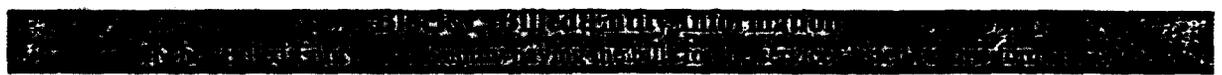
Services Ordered and Certification Form



Approval by OMB 3060-0806 Estimated Average Burden Hours Per Response: 4 hours  
This form asks schools and libraries to list the eligible telecommunications-related services they have ordered and estimate the annual charges for them so that the Fund Administrator can set aside sufficient support to reimburse providers for services.  
Please read instructions before beginning this application.

**Applicant's Form Identifier:**  
(Insert your own code to identify THIS Form 471)  
KPS01

**Form 471 Application #:**  
(inserted by Administrator)  
164612



|  |                    |  |                                |
|--|--------------------|--|--------------------------------|
| <b>1. Name of Billed Entity</b><br>KALAMAZOO PUBLIC SCHOOL DIST  |                    | <b>2. Funding Year:</b><br>07/01/2000 - 06/30/2001 |                                |
| <b>3. Entity Number</b><br>131284  |                    |  |                                |
| <b>a. Street</b><br>1220 HOWARD ST   |                    |  |                                |
| <b>City</b><br>KALAMAZOO   | <b>State</b><br>MI | <b>Zip Code 3Digit</b><br>49008                    | <b>Zip Code 4Digit</b><br>1871 |
| <b>b. Telephone number</b> ext.  |                    | <b>c. Fax number</b>                               |                                |
| ( 616 ) 337 - 0139   |                    | ( 616 ) 337 - 0195                                 |                                |
| <b>d. E-mail Address</b><br>williamses@kalamazoo.k12.mi.us   |                    |  |                                |
| <b>5. Type Of Applicant (Select only one type)</b>   |                    |  |                                |
| <input type="radio"/> Individual School (individual public or non-public school)   |                    |  |                                |
| <input checked="" type="radio"/> School District (LEA: public or non-public (e.g., diocesan) local district representing multiple schools) |                    |  |                                |
| <input type="radio"/> Library (including library system, library branch, or library consortium applying as a library)                      |                    |  |                                |
| <input type="radio"/> Consortium (intermediate service agencies, states, state networks, special consortia)                                |                    |  |                                |
| If you selected "Consortium" in #5 above, check here <input type="checkbox"/> if any members are ineligible non-governmental entities.     |                    |  |                                |
| Copy 4a-d above to 6b-e below  |                    |  |                                |
| Correct and/or add any Contact Person's information below as necessary, then select your preferred mode of contact                         |                    |  |                                |
| <b>6b. Street Address, P.O.Box, or Route Number</b>  |                    |  |                                |
| <input type="radio"/> 1220 HOWARD ST   |                    |  |                                |
| <b>City</b><br>KALAMAZOO   | <b>State</b><br>MI | <b>Zip Code 3Digit</b><br>49008                    | <b>Zip Code 4Digit</b><br>1871 |
| <input checked="" type="radio"/> <b>6c. Telephone Number (10 digits + ext.)</b>  |                    | ( 616 ) 337 - 0139 ext.                            |                                |
| <input type="radio"/> <b>6d. Fax Number (10 digits)</b>  |                    | ( 616 ) 337 - 0195                                 |                                |
| <b>6e. E-mail Address (50 characters)</b>  |                    |  |                                |

|   |                                |
|---|--------------------------------|
| 6e. E-mail Address (50 characters max.) | williamses@kalamazoo.k12.mi.us |
|---|--------------------------------|



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# FCC Form 471

Services Ordered and Certification Form



Applicant's Form Identifier: KPS01

Entity Number: 131284

Contact Person: Chris Williams

Phone Number: (616) 337-0139

**7. THIS ITEM CANNOT BE FILED ONLINE.** You may use this item ONLY to inform the fund administrator of Minor Contract Modifications for previously filed Forms 471, and you may do so ONLY through manual filing on paper. Please call 888-203-8100 for specific instructions.

8. Please provide your best estimate of the number of people who will be served by all of the services ordered in THIS Form 471. Schools/school districts complete 8a. Libraries complete 8b. Consortia complete 8a and/or 8b.

a. Number of students to be served 11056 b. Number of library patrons to be served         

9. The following questions seek summary outcome information based on the service ordered in this Form 471 application. Please complete only those rows that are relevant to THIS application.

| IF THIS APPLICATION INCLUDES...  | Before Order | After Order |
|--|--------------|-------------|
| a. Telephone service (for schools/school-districts/consortia only): How many classrooms had phone service before and after your order? | 900          | 950         |
| b. High-bandwidth voice/data/video service: How many buildings served before and after your order?                                     |              |             |
| c. High-bandwidth voice/data/video service: Highest speed to a building before and after your order?                                   |              |             |
| d. Dial-up Internet connections: How many before and after your order?   |              |             |
| e. Dial-up Internet connections: Highest speed before and after your order?  |              |             |
| f. Direct connections to the Internet: How many before and after your order?   |              |             |
| g. Direct connections to the Internet: Highest speed before and after your order?  |              |             |
| h. Internet access (for schools): How many rooms have Internet access before and after your order?                                     |              |             |
| i. Internet access (for libraries): How many buildings have Internet access before and after your order?                               |              |             |
| j. Internet access: How many computers (or other devices) with Internet access before and after your order?                            |              |             |
| k. Other technology outcomes?  |              |             |

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