

# KENTUCKY EDUCATION TECHNOLOGY FUNDING PROGRAM

## FUND UTILIZATION PLANNING FORM

**DUE DATE: 60 days from receipt of Offers Notification**

Name of District: Elizabethtown Independent Schools

Declaration of Intentions: *Check only one*

- ☒ The entire amount of the Offer of Assistance will be matched at the present time.
- ☐ The entire amount of the Offer of Assistance will be escrowed for up to:  
*choose only one:*
- ☐ 1 year
- ☐ 2 years
- ☐ 3 years
- ☐ The entire amount of the Offer of Assistance is rejected.
- ☐ A portion of this Offer of Assistance is being matched at the present time in the amount of \$ Click or tap here to enter text.  
The remaining amount of \$ Click or tap here to enter text. will be escrowed for Click or tap here to enter text. years (maximum of 3 years).  
The remaining amount of \$ Click or tap here to enter text. will be rejected.

We agree to abide by the policies passed by the Kentucky Board of Education, School Facilities Construction Commission, and appropriate state regulations regarding the use of the funds.

	11/15/2021
_____ Superintendent Signature	_____ Date

**Please be sure to include with this document:**

1. Excerpt of Board of Education meeting minutes (accepting, escrowing, or rejecting offer).
2. Copy of Journal Ledger Proof from MUNIS accounting system demonstrating transfer of funds to **Fund 2, Project 162I**, if amount is being matched at the present time.

**Return to:**

Email: KETS-Offers@education.ky.gov or  
Mail: Kentucky Department of Education  
300 Sower Blvd, 4<sup>th</sup> Fl, Frankfort, KY 40601  
Attention: Caprice Gay