

Technical Assistance Application Bright Schools Program California Energy Commission

Eligible Applicants:
K-12 Public School Districts /Charter Schools/
Community Colleges, State Special Schools, and
County Offices of Education

1. Applicant Information

Name of Local Education Agency (LEA) or Community College:	CDE code: (if applicable)	County:
Is the applicant a Charter School? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, has the Charter's term been renewed? <input type="checkbox"/> Yes, Date of renewal: _____ <input type="checkbox"/> No	
Mailing Address:	City:	Zip:
Street Address (if different) :	City:	Zip:
Contact Person:	Title:	Department:
Phone Number:	Email:	

2. Attach the following information:

- Governing Board Resolution (a sample template available at: <http://www.energy.ca.gov/efficiency/brightschools/>)
- Copies of latest 12 months electric and gas or propane bills showing energy cost / detailed usage information for each facility listed in Table 5. **OR**
 - Or Utility data release form - allowing the Energy Commission to access both 12 months of historical (and future) utility billing data and time-of-use interval data
- Hours of operation
- Past energy studies (if applicable) within last 3 years
- Site Map of facilities (e.g. 1As or a fire evacuation map)

- Only for schools with on-site solar systems:

Provide the Solar/photovoltaic (PV) on-site electric production (kWh) for the same 12-month period reported above. LEAs may obtain this information as follows: 1) For LEAs with power purchase agreement (PPA), provide the PPA bills, which report the annually purchased kWh.

OR

2) For LEAs with school-owned solar systems, provide the above information via a report from the solar production tracking system.

3. Project Description:

Type of assistance needed. (Please choose **one**):

- Energy audit – evaluate energy efficiency opportunities at existing facilities
- Review existing proposals and designs
- Develop equipment performance specifications
- Review equipment bid specifications
- Other (please describe):

Are there any specific equipment or proposed project(s) for which you are requesting technical assistance: (please describe)

Describe how you plan to implement the energy recommendations that may be identified:

- Proposition 39 Award
- Other funding -please describe_____

Do you have any current (or upcoming) working relationships with consultants, energy services companies, utilities, architects, or others that pertain to this request for Technical Assistance? If yes, please describe:

What is the expected project start date: _____ :

What is the expected project completion date

4. Project Team

Title	Name	Phone No	E-Mail
Project Manager			
Business Manager or Finance Officer			
Electric and Gas Utility Representative			
Consultant/Contractor (if known)			

5. Provide the following information. If you are requesting assistance for more than one sight, please prioritize from highest to lowest. Attach additional pages if needed.

Facility Name and Address	Year Built (excluding portables)	Estimated Building Size (sq. ft.)

I certify to the best of my knowledge that the data in this application are correct and complete.

Authorized Representative*

Name: _____ Title _____

Signature: _____ Date _____

*Authorized Representative is the one designated by the governing body, in your Resolution, to execute documents in the name of the applicant.

Edmund G. Brown Jr.
Governor



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California Energy Commission
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