

FY2026

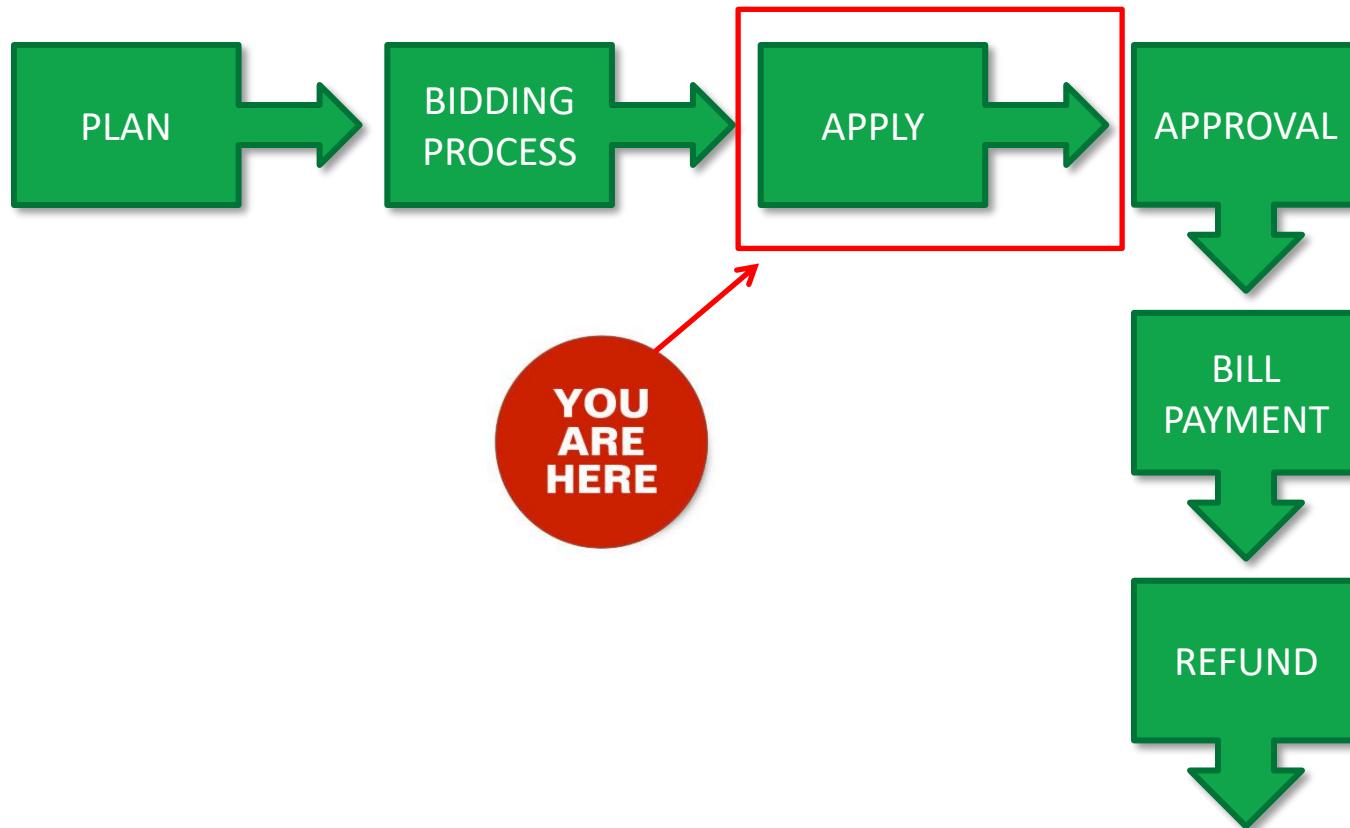
FCC Form 471

Category 1 Services

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Where does the Form 471 fall in the E-Rate process?



The Basics

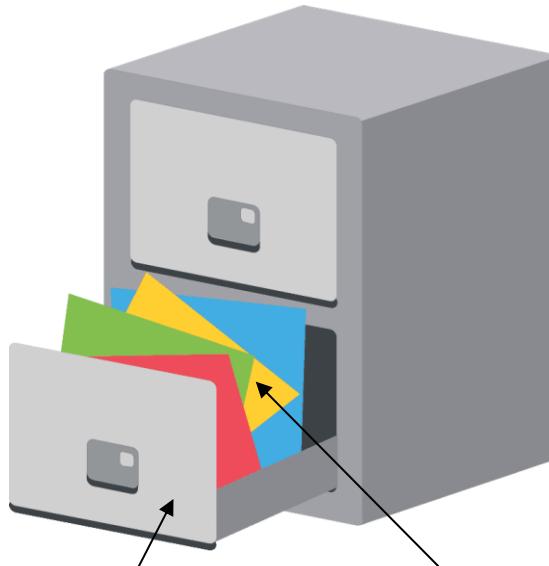
What is the FCC Form 471?

An indication of which vendor has been selected to provide services and the amount of funding being requested

- Contains one or more Funding Requests composed of various FRN Line Items
- Designates the selected service provider(s) and eligible services that have been chosen as a result of the FCC Form 470
- Describes the requested products and services in detail
- Identifies the eligible entities that will receive the services
- Calculates the amount of funding support is being sought
- Relays the discount percentage to which the applicant is entitled
- Certifies the applicant's compliance with program rules

How is the Form 471 organized?

The Form 471 functions like a file cabinet



The file cabinet has drawers - each drawer is a **Funding Request** providing summary information about the service type, service provider, establishing Form 470, and the contract or agreement

The drawers contain file folders - each folder is a **Funding Request Line Item** providing details about the individual products and services being requested such as the make and model and cost

What should I have already done?

You should have already done the following:

- filed an FCC Form 470
- waited at least 28 days
- selected a winning bid (remember that price must be the most heavily weighted factor)
- signed a contract (with some rare exceptions discussed further in this guide)
- submitted your contract information into the Contract Module in EPC

Words of Caution: complete the Contract Module before beginning the Form 471 to avoid having to stop mid-stream --- see the Contracts Module guide for instructions

Once these steps are done, you can file an FCC Form 471

When can I file a Form 471?

- USAC announces a Form 471 filing window each year.
- The earliest possible date that a Form 471 could be filed will be the date established as the opening date of the Form 471 filing window
- However, **the Form 471 cannot be filed until the establishing Form 470 has been posted for at least 28 days and a contract has been signed and dated**
- The form must be submitted by 11:59 PM Eastern Time on the date that the application filing window closes

**FY2026 Form 471 Filing Window:
January 21, 2026 at Noon ET – April 1, 2026 at 11:59 PM ET**

Where do I file a Form 471?

You must file the Form 471 by accessing the account in the EPC Portal for the Billed Entity that will negotiate with potential service providers for eligible products and services

This is usually the school district, unless an entity is considered to be an independent school

How many separate forms do I file?

Your choice!

- You may file one Form 471

OR

- You may file a separate Form 471 for each type of service

However, the system requires separate forms for:

- Category 1 (Data Transmission and/or Internet Access)
and
- Category 2 (Internal Connections, Basic Maintenance of Internal Connections, Managed Internal Broadband Services)

Form Actions: Saving and Discarding the Form

Once you are in a form, you will be given options at the bottom of most screens to save and continue working on the form or to discard the form altogether.

BACK

DISCARD FORM

SAVE & SHARE

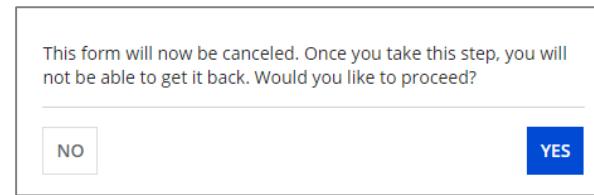
SAVE & CONTINUE

Form Actions

[BACK](#) [DISCARD FORM](#)

[SAVE & SHARE](#) [SAVE & CONTINUE](#)

- If you select the “BACK” button, you will be taken back one screen.
- If you select the “DISCARD FORM” button, the entire form will be discarded. Once you confirm that you want to discard the form, it will no longer be available in EPC.

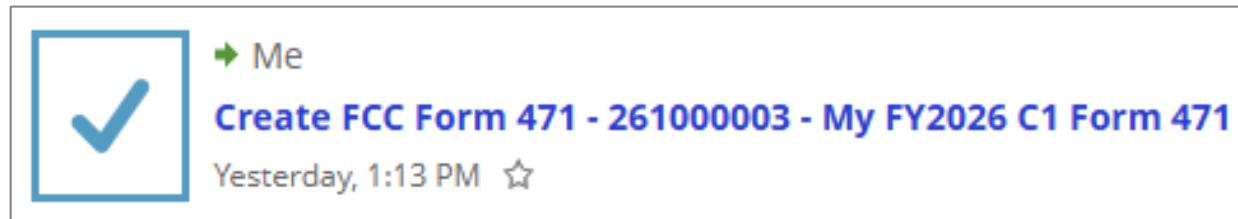


- If you select the “SAVE & SHARE” button, the form is saved and will appear in the task list for other partial rights and full rights users in your organization. One of them can accept the form to view it and make changes to it. Once the new user has finished making changes, he or she can select a link to return the task to all users in the group.
- If you select the “SAVE & CONTINUE” button, you will proceed to the next page to continue entering information for the form.

***NOTE:** An error message will display if you select the “SAVE & CONTINUE” button when information is not entered into a required (*) field or is entered incorrectly. The system will not allow you to continue until the information is corrected.*

If, after completing part of the form, you want to save your work and return to it later, click on the “SAVE & CONTINUE” button.

When you return, go to the “Task” link in the blue navigation bar to find a task to create the in-process form.



When you click on the task, your form will open back up where you left off.

Applying For Category 1 Services

Note: You cannot include Category 1 funding requests on a Form 471 containing Category 2 requests. You must file separate applications.

Applying for C1

① Navigate to

<https://forms.universalservice.org/portal>

② Log into One Portal with your username
(your full email address) and One Portal password



Universal Service
Administrative Co.

Username

Password

[Forgot password?](#)

You are accessing a portal to Universal Service Administrative Company (USAC) systems used to administer participation in the federal Universal Service programs in compliance with 47 C.F.R. Part 54. Access to the systems is provided solely to USAC-authorized users for USAC-authorized business purposes. By logging in, you represent that you are an authorized user. Use of this system indicates acceptance of the terms and conditions governing the USAC systems. USAC monitors user access and content for compliance with applicable laws and policies. Use of the system may be recorded, read, searched, copied and/or captured and is also subject to audit. Unauthorized use or misuse of this system is strictly prohibited and subject to disciplinary and/or legal action.

Click the box to accept

By signing in, I accept the terms and conditions of the USAC system.

[Sign In](#)

Don't have an account? [Create an account](#)

Applying for C1

- ③ Complete the steps as prompted to obtain and enter a one-time verification code
- ④ Once you have successfully logged into One Portal and are viewing its dashboard, access EPC by clicking on the gray block for “E-Rate Productivity Center (EPC)”

Dashboard

 Upcoming Dates

No upcoming dates found.

 Schools and Libraries

E-Rate Productivity Center (EPC) - EPC is the online system for E-Rate program participants to submit applications, manage program processes, and communicate with USAC. Applicants and service providers use EPC to prepare, submit, and certify E-Rate invoicing forms for Funding Years 2016 and later, including FCC Form 472 BEAR, FCC Form 473 SPAC, and FCC 474 SPI. For more information, please visit the applicant or service provider invoicing page at <https://www.usac.org/e-rate/> or contact the E-Rate Customer Service Center at (888) 203-8100.

Emergency Connectivity Fund (ECF) - Emergency Connectivity Fund participants use the ECF Portal to submit applications and review notifications regarding their program activities. Using this link, schools and libraries can also access the FCC Form 472 (BEAR) and service providers can access the FCC Form 474 (SPI) to request ECF reimbursement.

Help?

[Send us a message](#)
[Click here](#)

Call us
(888) 641-8722

Applying for C1

Your EPC Landing Page will display

My Applicant Landing Page



Universal Service
Administrative Co.

Welcome, School District 6!

Pending Inquiries

Type -- Select a Type --

Funding Year -- Select a Funding Year --

Application/Request -- Enter an Application/Request ID or Nickname --

APPLY FILTERS | CLEAR FILTERS

Pending COMAD Inquiries are not included.

| Application/Request Number | Type | Nickname | Inquiry Name | Outreach Type | Date Sent | Due Date ↑ | Extn. | Status |
|----------------------------|------|----------|--------------|---------------|-----------|------------|-------|--------|
| No items available | | | | | | | | |

Applying for C1

⑤ Select the “FCC Form 471” link on your landing page to begin a new FCC Form 471

My Applicant Landing Page

 Universal Service Administrative Co.

Welcome, School District 6!

Pending Inquiries

Type: -- Select a Type --

Funding Year: -- Select a Funding Year --

Application/Request: -- Enter an Application/Request ID or Nickname --

APPLY FILTERS | CLEAR FILTERS

Pending COMAD Inquiries are not included.

| Application/Request Number | Type | Nickname | Inquiry Name | Outreach Type | Date Sent | Due Date ↑ | Extn. | Status |
|----------------------------|------|----------|--------------|---------------|-----------|------------|-------|--------|
| No items available | | | | | | | | |

Words of Caution: Even if you are filing a Form 471 for services to be received by a single school in your district, the form must be filed for the school district. The only exception to this rule is if your school is listed in EPC as independent and is not associated with a school district BEN. As you create the form you will select the entity that will receive the requested service.

Form 471 Section One: Basic Information

*First, you will review and enter
some basic information.*

[Billed Entity Information]

When you begin the FCC Form 471, the basic information about the billed entity, including the Billed Entity Number (BEN), name, and address will automatically populate from the organization's EPC profile.

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116)

Last Saved:

| Basic Information | Entity Information | Funding Requests | Certify |
|--|---|-------------------------------------|---------|
| Where applicable, we've completed this section of the form based on information from your applicant entity's profile. If any of the non-editable information is incorrect, or you wish to change the information, please update your profile first by going to your entity record, and clicking Manage Organization from the Related Actions menu. If you do not have access to Manage Organization, please contact your applicant entity's account administrator or create a customer service case to request updates to your applicant entity's profile. | | | |
| > FCC Notice Required By The Paperwork Reduction Act (OMB Control Number: 3060-0806) | | | |
| Billed Entity Information | | | |
| School District 6 100 Main Street Springfield, ME 04487 555-555-7878 school.district6.user1@mailinator.com | Billed Entity Number: 116 FCC Registration Number: 0027012228 Applicant Type: School District | | |
| Application Nickname Please enter an application nickname here. <small>•*</small> | | | |
| FCC Form 471 Help Show Help | | | |
| DISCARD FORM | | SAVE & CONTINUE | |

You cannot edit this information on the form. If you wish to make changes to the information, the Account Administrator can update the organization's profile using the "Manage Organization" function. Changes made in the profile will be automatically updated in the form.

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116)

Last Saved:

Basic Information

Entity Information

Funding Requests

Certify

Where applicable, we've completed this section of the form based on information from your applicant entity's profile. If any of the non-editable information is incorrect, or you wish to change the information, please update your profile first by going to your entity record, and clicking Manage Organization from the Related Actions menu. If you do not have access to Manage Organization, please contact your applicant entity's account administrator or create a customer service case to request updates to your applicant entity's profile.

> FCC Notice Required By The Paperwork Reduction Act (OMB Control Number: 3060-0806)

Billed Entity Information

School District 6
100 Main Street
Springfield, ME 04487
555-555-7878
school.district6.user1@mailinator.com

Billed Entity Number: 116
FCC Registration Number: 0027012228
Applicant Type: School District

Application Nickname

Please enter an application nickname here. ? *

① Enter an application nickname that will serve as a reminder for the requests in this form

FCC Form 471 Help

Show Help

② Then click on the “SAVE & CONTINUE” button to proceed

DISCARD FORM

SAVE & CONTINUE

The Nickname you entered will now appear at the top of the form along with your Billed Entity Name and Number

The Form 471 Number also displays – the first two digits indicate which funding year the form is for

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 C2 Form 471 - Form # 261000004

Last Saved: 1/13/2026 1:13 PM EST

Basic Information Entity Information Funding Requests Certify

Note the breadcrumb trail indicating which section of the form you are currently working on

[Consultant Information]

If the account profile indicates that you are using a consultant, that consultant will automatically appear in this section.

| | | | |
|-----------------------------------|------------------------------------|----------------------------------|-------------------------|
| Basic Information | Entity Information | Funding Requests | Certify |
|-----------------------------------|------------------------------------|----------------------------------|-------------------------|

Next, you will identify the individuals assisting in seeking E-rate support.

Consultant Information

Consulting Firms

The consulting firms associated with your organization are listed below.

| Name | Consultant Registration Number | Phone Number | Email |
|------------------------|--------------------------------|--------------|-------|
| USAC Consulting Firm 1 | 15010001 | 111-111-1111 | |

If a consultant has not been added to the profile, no consultant will display. If you are using a consultant, you will need to return to the profile and enter consultant information.

| | | | |
|-----------------------------------|------------------------------------|----------------------------------|-------------------------|
| Basic Information | Entity Information | Funding Requests | Certify |
|-----------------------------------|------------------------------------|----------------------------------|-------------------------|

Next, you will identify the individuals assisting in seeking E-rate support.

Consultant Information

There are currently no consulting firms associated with your organization. If this is in error, please update your organization profile.

③ Select a contact person for this form

| Basic Information | Entity Information | Funding Requests | Certify |
|--|--------------------------------|------------------|---------|
| Next, you will identify the individuals assisting in seeking E-rate support. | | | |
| Consultant Information | | | |
| Consulting Firms | | | |
| The consulting firms associated with your organization are listed below. | | | |
| Name | Consultant Registration Number | Phone Number | Email |
| USAC Consulting Firm 1 | 15010001 | 111-111-1111 | |

Contact Information

Are you the main contact person? *

YES NO

B If you are not the main contact, click on the “NO” button
then skip to page 28 in this guide

A If you are the main contact for this form, click on the “YES” button
then go to the next page in this guide

If you are the main contact (you chose “YES”)....

A ① If you chose “YES”, your contact info will automatically display

| Basic Information | Entity Information | Funding Requests | Certify |
|--|--------------------------------|---|---------|
| Next, you will identify the individuals assisting in seeking E-rate support. | | | |
| Consultant Information | | | |
| Consulting Firms | | | |
| The consulting firms associated with your organization are listed below. | | | |
| Name | Consultant Registration Number | Phone Number | Email |
| USAC Consulting Firm 1 | 15010001 | 111-111-1111 | |
| Contact Information | | | |
| Are you the main contact person? | | School District 6 User 1 school.district6.user1@mailinator.com 555-555-5555 | |
| <input checked="" type="checkbox"/> YES ✓ <input type="checkbox"/> NO | | | |

If you are not the main contact (you chose “NO”)....

| Basic Information | Entity Information | Funding Requests | Certify |
|--|--------------------------------|------------------|---------|
| Next, you will identify the individuals assisting in seeking E-rate support. | | | |
| Consultant Information | | | |
| Consulting Firms | | | |
| The consulting firms associated with your organization are listed below. | | | |
| Name | Consultant Registration Number | Phone Number | Email |
| USAC Consulting Firm 1 | 15010001 | 111-111-1111 | |

Contact Information

Are you the main contact person?

YES NO ✓

Main Contact Person *

Please select a main contact person by typing the contact person's name or email address.

B ① If you chose “NO”, click in the Main Contact Person box that now displays on the page

[Contact Information]

Basic Information Entity Information Funding Requests Certify

Next, you will identify the individuals assisting in seeking E-rate support.

Consultant Information

Consulting Firms

The consulting firms associated with your organization are listed below.

| Name | Consultant Registration Number | Phone Number | Email |
|------------------------|--------------------------------|--------------|-------|
| USAC Consulting Firm 1 | 15010001 | 111-111-1111 | |

Contact Information

Are you the main contact person?

YES NO ✓

Main Contact Person *

sch

 School District 6 User 1
school.district6.user1@mailinator.com

B ② Start typing the name or email address of the contact, and then click on the blue box for that person to fill in their information

NOTE: Only those individuals who have been associated with your organization can be the contact person for the form

[Holiday/Summer Contact Information]

| Basic Information | Entity Information | Funding Requests | Certify | | | | | | | | |
|---|--------------------------------|-------------------------------------|---------|------|--------------------------------|--------------|-------|------------------------|----------|--------------|--|
| Next, you will identify the individuals assisting in seeking E-rate support. | | | | | | | | | | | |
| <h2>Consultant Information</h2> <p>Consulting Firms</p> <p>The consulting firms associated with your organization are listed below.</p> <table border="1"><thead><tr><th>Name</th><th>Consultant Registration Number</th><th>Phone Number</th><th>Email</th></tr></thead><tbody><tr><td>USAC Consulting Firm 1</td><td>15010001</td><td>111-111-1111</td><td></td></tr></tbody></table> | | | | Name | Consultant Registration Number | Phone Number | Email | USAC Consulting Firm 1 | 15010001 | 111-111-1111 | |
| Name | Consultant Registration Number | Phone Number | Email | | | | | | | | |
| USAC Consulting Firm 1 | 15010001 | 111-111-1111 | | | | | | | | | |
| <h2>Contact Information</h2> <p>Are you the main contact person?</p> <p><input checked="" type="checkbox"/> YES ✓ <input type="checkbox"/> NO</p> <p>School District 6 User 1 school.district6.user1@mailinator.com 555-555-5555</p> <p>④ Enter Holiday or Summer contact information</p> <p>Holiday / Summer Contact Information</p> <p>Please provide any alternate contact information to use during holiday/ vacation period including the name of any alternate contact person and how best to reach them.</p> | | | | | | | | | | | |
| <h2>FCC Form 471 Help</h2> <p>Show Help</p> | | | | | | | | | | | |
| BACK | DISCARD FORM | SAVE & CONTINUE | | | | | | | | | |

Basic Information

Basic Information

Entity Information

Funding Requests

Certify

Next, you will identify the individuals assisting in seeking E-rate support.

Consultant Information

Consulting Firms

The consulting firms associated with your organization are listed below.

| Name | Consultant Registration Number | Phone Number | Email |
|------------------------|--------------------------------|--------------|-------|
| USAC Consulting Firm 1 | 15010001 | 111-111-1111 | |

Contact Information

Are you the main contact person?

YES ✓ NO

School District 6 User 1

school.district6.user1@mailinator.com

555-555-5555

Holiday / Summer Contact Information

Contact John Doe at johndoe@schooldistrict6.org during July and August

Jane Smith (janesmith@schooldistrict6.org / 207-555-5555) serves as an alternate contact person for this form

Please provide any alternate contact information to use during holiday/ vacation period including the name of any alternate contact person and how best to reach them.

FCC Form 471 Help

[Show Help](#)

⑤ Click on the “SAVE & CONTINUE” button to proceed

Form 471 Section Two: Entity Information

*Next, information about the applicant will
be provided from its entity profile.*

[Category of Service]

① Click on the “CATEGORY 1” button to begin a Form 471 for Category 1 services

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 C1 Form 471 - Form # 261000003

Last Saved: 1/14/2026 1:05 PM EST

| Basic Information | Entity Information | Funding Requests | Certify |
|--|--|---|---------|
| Next, you will identify the category of service for the product and services you are requesting. If you need help determining the correct category of service, please review the Eligible Services List on the USAC website. | | | |
| Category of Service | | | |
| What is the category of service for the product and services that you are requesting? | | | |
| You can only select one Category of Service per FCC Form 471. You can submit a second application for the other Category of Service. | | | |
| CATEGORY 1 <ul style="list-style-type: none">• Data Transmission and/or Internet Access | CATEGORY 2 <ul style="list-style-type: none">• Basic Maintenance of Internal Connections• Internal Connections• Managed Internal Broadband Services | ② Then click on the “SAVE & CONTINUE” button | |
| FCC Form 471 Help | | SAVE & CONTINUE | |
| Show Help | | BACK DISCARD FORM | |

Words of Caution:

Once you have selected a category and leave this page, you cannot change the selection.

The system will not allow you to file for both Category 1 and Category 2 requests on the same Form 471. You must file separate applications.

[Entity Information]

Information about the school district or independent school will display

Be careful - clicking on the link for the entity will take you out of the form and bring you to the organization's details

| Basic Information | | Entity Information | | | Funding Requests | | | Certify | |
|--|-----|--------------------|--------------|-----------------|------------------|----------------------------|---|--|------------------|
| We've completed this section of the form based on information from your applicant entity's profile. If any of the non-editable information is incorrect, or you wish to change the information, please update your profile first by going to your entity record, and clicking Manage Organization from the Related Actions menu. If you do not have access to Manage Organization, please contact your applicant entity's account administrator or create a customer service case to request updates to your applicant entity's profile. | | | | | | | | | |
| BEN Name | BEN | Urban or Rural | State LEA ID | State School ID | NCES Code | School District Attributes | How does the district report its student count for Category Two budget? | Sum of Student Counts of all Schools in the District | Endowment Amount |
| School District 6 | 116 | Rural | N/A | N/A | | Public School District | A number for each school in the district | 360 | None |

FCC Form 471 Help

[Show Help](#)

[BACK](#) [DISCARD FORM](#) [SAVE & SHARE](#) [SAVE & CONTINUE](#)

NOTE: This information cannot be updated within the form

③ Click on the “SAVE & CONTINUE” button

[Related Entities Information]

Information about any related entities such as schools and NIFs in the district will display

Be careful - clicking on the link for a building will take you out of the form and bring you to the entity's details

| Basic Information | | Entity Information | | Funding Requests | | Certify | | | | | | | | |
|--|---------------|--------------------|------|------------------|-----------------|-----------|---|----------------------------------|----------------------|----------------|---------------|------------------------------|------------------------------|------------------|
| We've completed this section of the form based on information from your applicant entity's profile. If any of the non-editable information is incorrect, or you wish to change the information, please update your profile first by going to your entity record, and clicking Manage Organization from the Related Actions menu. If you do not have access to Manage Organization, please contact your applicant entity's account administrator or create a customer service case to request updates to your applicant entity's profile. | | | | | | | | | | | | | | |
| Related Entity(ies) Information | | | | | | | | | | | | | | |
| Entity Details | | | | | | | | | | | | | | |
| Fields with '*' next to them are not sortable | | | | | | | | | | | | | | |
| Entity Name ↑ | Entity Number | Urban or Rural | NIF* | State LEA ID | State School ID | NCES Code | # of students that attend this school full time | Student Count Based on Estimate* | Alternative Discount | CEP Percentage | CEP Base Year | Total Students for C2 Budget | School Attributes* | Endowment Amount |
| School District 6 NIF | 119 | Rural | | N/A | N/A | | | N/A | N/A | N/A | N/A | | | None |
| School District 6 School A | 117 | Rural | | | | | 110 | N/A | None | N/A | N/A | 120 | Public School | None |
| School District 6 School B | 118 | Rural | | | | | 230 | N/A | None | N/A | N/A | 230 | Public School, Tribal School | None |

FCC Form 471 Help

Show Help

④ Click on the “SAVE & CONTINUE” button

BACK DISCARD FORM SAVE & CONTINUE

NOTE: This information cannot be updated within the form

Information about the discount calculation will display

| Basic Information | Entity Information | Funding Requests | Certify | | |
|--|----------------------------|------------------------------|------------------------------------|----------------------------|----------------------------|
| We've completed this section of the form based on information from your applicant entity's profile. If any of the non-editable information is incorrect, or you wish to change the information, please update your profile first by going to your entity record, and clicking Manage Organization from the Related Actions menu. If you do not have access to Manage Organization, please contact your applicant entity's account administrator or create a customer service case to request updates to your applicant entity's profile. | | | | | |
| Requested Discount Calculation | | | | | |
| More than 50 percent of your individual schools must be rural for the school district to be considered rural. (Swing spaces are not considered.) | | | | | |
| This discount rate has not been approved for the current year | | | | | |
| School District Full-time Enrollment | School District NSLP Count | School District NSLP Percent | School District Urban/Rural Status | Category One Discount Rate | Category Two Discount Rate |
| 340 | 175 | 51% | Rural | 80% | 80% |

SHOW ENTITIES ← *Clicking on the “SHOW ENTITIES” button will display the schools in the district*
FCC Form 471 Help
[Show Help](#)

BACK **DISCARD FORM** **SAVE & CONTINUE**

[Discount Calculation]

Basic Information

Entity Information

Funding Requests

Certify

We've completed this section of the form based on information from your applicant entity's profile. If any of the non-editable information is incorrect, or you wish to change the information, please update your profile first by going to your entity record, and clicking Manage Organization from the Related Actions menu. If you do not have access to Manage Organization, please contact your applicant entity's account administrator or create a customer service case to request updates to your applicant entity's profile.

Requested Discount Calculation

More than 50 percent of your individual schools must be rural for the school district to be considered rural. (Swing spaces are not considered.)

This discount rate has not been approved for the current year

| School District Full-time Enrollment | School District NSLP Count | School District NSLP Percent | School District Urban/Rural Status | Category One Discount Rate | Category Two Discount Rate |
|--------------------------------------|----------------------------|------------------------------|------------------------------------|----------------------------|----------------------------|
| 340 | 175 | 51% | Rural | 80% | 80% |

HIDE ENTITIES

← *Clicking on the "HIDE ENTITIES" button will collapse the list*

Entity Details

| Organization | BEN | Total Number Of Students Enrolled In School | Total Number Of Students in School Eligible For NSLP | Urban/Rural Status | Alternative Discount |
|----------------------------|-----|---|--|--------------------|----------------------|
| School District 6 School A | 117 | 110 | 60 | Rural | None |
| School District 6 School B | 118 | 230 | 115 | Rural | None |

[Discount Calculation]

If you see an error such as the red box below, you must return to your organization's profile to determine what is causing the issue. The information cannot be updated within the form.

| Basic Information | Entity Information | Funding Requests | Certify | | |
|--|----------------------------|------------------------------|------------------------------------|----------------------------|----------------------------|
| We've completed this section of the form based on information from your applicant entity's profile. If any of the non-editable information is incorrect, or you wish to change the information, please update your profile first by going to your entity record, and clicking Manage Organization from the Related Actions menu. If you do not have access to Manage Organization, please contact your applicant entity's account administrator or create a customer service case to request updates to your applicant entity's profile. | | | | | |
| <h3>Requested Discount Calculation</h3> <p>More than 50 percent of your individual schools must be rural for the school district to be considered rural.</p> <div style="border: 2px solid red; padding: 5px; margin-top: 10px;">The information in your organization's profile is not sufficient to calculate your Discount Rate.</div> | | | | | |
| School District Full-time Enrollment | School District NSLP Count | School District NSLP Percent | School District Urban/Rural Status | Category One Discount Rate | Category Two Discount Rate |
| 340 | 170 | 50% | | | |

[SHOW ENTITIES](#)

FCC Form 471 Help

[Show Help](#)

[BACK](#) [DISCARD FORM](#) [SAVE & CONTINUE](#)

Help! I need to update entity information

Once the Administrative Window has closed, your organization's profile data will be locked. You will need to contact USAC's Client Service Center at 1-888-203-8100 for assistance in making any changes.

Help! I left the form and can't get back in!

If you clicked on something that brought you to a place outside of the form you are currently creating, you can re-access the form by:

- ① Clicking on the “Tasks” link in the blue navigation bar

Universal Service Administrative Co.

Assigned to Me >

Sent by Me

Starred ★

STATUS

Open ✕

DEADLINE

Overdue

Today

Within 7 days

Click here to send a task...

Me
Create FCC Form 471 - 261000003 - My FY2026 C1 Form 471
3 minutes ago ★

Me, Test_498 user, John Doe
Create FCC Form 471 - 211000029 - My Form 471
12 hours ago ★

Me
Create FCC Form 471 - 261000004 - My FY2026 C2 Form 471
Yesterday, 1:13 PM ★

- ② And then clicking on the task to create the in-process form

Entity Information

[Basic Information](#)[Entity Information](#)[Funding Requests](#)[Certify](#)

We've completed this section of the form based on information from your applicant entity's profile. If any of the non-editable information is incorrect, or you wish to change the information, please update your profile first by going to your entity record, and clicking Manage Organization from the Related Actions menu. If you do not have access to Manage Organization, please contact your applicant entity's account administrator or create a customer service case to request updates to your applicant entity's profile.

Requested Discount Calculation

More than 50 percent of your individual schools must be rural for the school district to be considered rural. (Swing spaces are not considered.)

This discount rate has not been approved for the current year

| School District Full-time Enrollment | School District NSLP Count | School District NSLP Percent | School District Urban/Rural Status | Category One Discount Rate | Category Two Discount Rate |
|--------------------------------------|----------------------------|------------------------------|------------------------------------|----------------------------|----------------------------|
| 340 | 175 | 51% | Rural | 80% | 80% |

[SHOW ENTITIES](#)

FCC Form 471 Help

[Show Help](#)

⑤ Click on the “SAVE & CONTINUE” button to proceed

[BACK](#)[DISCARD FORM](#)[SAVE & CONTINUE](#)

Form 471 Section Three: Funding Requests

Next, you will create the funding requests.

This section has several purposes --- to indicate the requested services and to indicate which entities are receiving those services.

Funding Requests

A funding request is a service or group of services that share a common service type, initiating Form 470, service provider, and contract (if a contract is cited)

Each funding request will be identified by its funding request number or FRN

Creating an FRN in EPC is a two-step process:

- 1. Enter “high level” FRN information*
- 2. Enter details (FRN Line Items)*

| Basic Information | Entity Information | Funding Requests | Certify | | | | | | | | |
|---|---------------------|--|----------------------------|------------------------------|------------|--------------------------|-----------------|--|--|--|--|
| This page displays all of the funding requests for this application. From here you can create a new FRN, or edit, delete, or manage the line items of an existing one. | | | | | | | | | | | |
| <h3>Funding Requests</h3> <p>To create or update specific FRN Line Item(s), please click on the FRN number hyperlink.</p> <table border="1"><thead><tr><th><input type="checkbox"/> FRN</th><th>↓ Nickname</th><th>Number of FRN Line Items</th><th>FRN Calculation</th></tr></thead><tbody><tr><td colspan="4">You haven't created any Funding Requests (FRNs) yet. Click the "Add FRN" button to start creating your first FRN</td></tr></tbody></table> <p>ADD FRN EDIT FRN REMOVE FRN MANAGE FRN LINE ITEMS</p> | | | | <input type="checkbox"/> FRN | ↓ Nickname | Number of FRN Line Items | FRN Calculation | You haven't created any Funding Requests (FRNs) yet. Click the "Add FRN" button to start creating your first FRN | | | |
| <input type="checkbox"/> FRN | ↓ Nickname | Number of FRN Line Items | FRN Calculation | | | | | | | | |
| You haven't created any Funding Requests (FRNs) yet. Click the "Add FRN" button to start creating your first FRN | | | | | | | | | | | |
| FCC Form 471 Help Show Help | | ① Click on the “ADD FRN” button to create a new Funding Request | | | | | | | | | |
| BACK | DISCARD FORM | SAVE & SHARE | REVIEW FCC FORM 471 | | | | | | | | |

② Enter a Nickname for this FRN that will serve as a reminder of this specific service request

Basic Information Entity Information **Funding Requests** Certify

On this page, you will select a nickname and the service type of the product and services that you are requesting

Funding Request Key Information

Please enter a Funding Request Nickname here ? *

Is this Funding Request a continuation of an FRN from a previous funding year? *

YES NO

Copy FRN

If you want to copy an existing Funding Request, select Copy FRN below. Note that if an FCDL has been issued for the FRN, the approved version of the FRN will be copied.

COPY FRN

Service Type

What is the service type of the product and services that you are requesting?

Data Transmission and/or Internet Access ▼

FCC Form 471 Help

[Show Help](#)

CANCEL **CONTINUE**

③ Determine whether or not this Funding Request is a continuation of a request from a previous funding year (for example, the second year of a multi-year contract)

Basic Information Entity Information **Funding Requests** Certify

On this page, you will select a nickname and the service type of the product and services that you are requesting

Funding Request Key Information

Please enter a Funding Request Nickname here ?*

Is this Funding Request a continuation of an FRN from a previous funding year?*

B If it is not, click on the “NO” button
then skip to page 47 in this guide

A If it is a continuation, click on the “YES” button
then go to the next page in this guide

If this form is a continuation from a previous year (you chose “YES”)....

Basic Information Entity Information **Funding Requests** Certify

On this page, you will select a nickname and the service type of the product and services that you are requesting

Funding Request Key Information

Please enter a Funding Request Nickname here ?*

Is this Funding Request a continuation of an FRN from a previous funding year?

YES NO

Previous Year FRN Number *

A ① If you chose “YES”, enter the FRN number in the “Previous Year FRN Number” text box that now displays on the page

[Basic Information](#)[Entity Information](#)[Funding Requests](#)[Certify](#)

On this page, you will select a nickname and the service type of the product and services that you are requesting

Funding Request Key Information

Please enter a Funding Request Nickname here  *

Is this Funding Request a continuation of an FRN from a previous funding year?

Copy FRN

If you want to copy an existing Funding Request, select Copy FRN below. Note that if an FCDL has been issued for the FRN, the approved version of the FRN will be copied.

Service Type

What is the service type of the product and services that you are requesting?

④ If you want to copy an existing FRN as a starting point in creating the FRN on this form, click on the “COPY FRN” button and use the provided tool to locate the FRN you wish to copy

FCC Form 471 Help

[Show Help](#)

[Basic Information](#)[Entity Information](#)[Funding Requests](#)[Certify](#)

On this page, you will select a nickname and the service type of the product and services that you are requesting

Funding Request Key Information

Please enter a Funding Request Nickname here  *

Is this Funding Request a continuation of an FRN from a previous funding year?

Copy FRN

If you want to copy an existing Funding Request, select Copy FRN below. Note that if an FCDL has been issued for the FRN, the approved version of the FRN will be copied.

Service Type

What is the service type of the product and services that you are requesting?

⑤ Verify that the service type is correct
(there is only one choice for C1)

FCC Form 471 Help

[Show Help](#)

⑥ Click on the “CONTINUE” button

Basic Information

Entity Information

Funding Requests

Certify

Next, you will identify the purchasing agreement type for the product and services you are requesting.

FRN Contract

How are the services for this FRN being purchased?

Contract information is stored in your Profile; you can add a new Contract at any time. Details about your Tariff and Month-to-Month services will be entered in your FRN.

| | | |
|----------|--------|----------------|
| CONTRACT | TARIFF | MONTH-TO-MONTH |
|----------|--------|----------------|

| | | |
|---|---|---|
| A | B | C |
|---|---|---|

FCC Form 471 Help

Show Help

BACK CANCEL

CONTINUE

A tariffed service is a telecommunications service that you purchase at rates regulated by the state regulatory commission and/or the FCC, for which you do not have a signed, written contract.

⑦ Click on the button for the appropriate method describing how services for this particular FRN are being purchased

⑧ Then click on the “CONTINUE” button on this screen

- A Contract (***MOST COMMON CHOICE***) → go to the next page in this guide
- B Tariff → skip to page 58 in this guide
- C Month-to-Month → skip to page 71 in this guide

If you chose “CONTRACT” on the previous screen

A

If you chose “CONTRACT” and you have not yet added the contract for this FRN to the Contracts Module, complete the steps outlined in the “Contracts Module” training guide before proceeding with these next steps

A ① Search for a contract by entering a value in any of the search boxes

NOTE: By default, the BEN for the organization is listed. If you know none of the other information, you can simply search by BEN.

Basic Information Entity Information Funding Requests Certify

Next, you will associate a contract to your FRN. Please search for a contract below and select one to associate it to the FRN.

Associate a Contract

Search by Creating Organization BEN
116

Please note that BEN is a required field and you can use other search fields to narrow down your result.

Search by Contract ID

Search by Nickname (All or Partial)

Search by Contract No.

FCC Form 471 Help
Show Help

A ② Click on the “SEARCH” button to locate contracts matching the entered criteria

CLEAR FILTERS **SEARCH**

BACK **CANCEL** **CONTINUE**

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate a contract to your FRN. Please search for a contract below and select one to associate it to the FRN.

Associate a Contract

Search by Creating Organization BEN

Please note that BEN is a required field and you can use other search fields to narrow down your result.

Search by Contract ID

Search by Nickname (All or Partial)

Search by Contract No.

If your search terms are unsuccessful, click on the “CLEAR FILTERS” button to remove text entered into the search boxes and then try another search

FCC Form 471 Help

[Show Help](#)

CLEAR FILTERS **SEARCH**

BACK **CANCEL** **CONTINUE**

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate a contract to your FRN. Please search for a contract below and select one to associate it to the FRN.

Associate a Contract

Search by Creating Organization BEN **Search by Nickname (All or Partial)** **Search by Contract No.**

Please note that BEN is a required field and you can use other search fields to narrow down your result.

Search by Contract ID

A ③ Select the checkbox for the correct contract for this FRN

CLEAR FILTERS **SEARCH**

| Contract ID | Contract Number | Nickname | Award Date | Creating Organization BEN |
|--------------------------|-----------------|--------------------|------------|---------------------------|
| <input type="checkbox"/> | 15476 | My 2026 Contract | 1/1/2026 | 116 |
| <input type="checkbox"/> | 15477 | My FY2026 Contract | 1/1/2026 | 116 |

FCC Form 471 Help

[Show Help](#)

BACK **CANCEL** **CONTINUE**

Summary information about the selected contract will display from the Contracts Module

| <input type="checkbox"/> Contract ID | Contract Number | Nickname | Award Date |  | Creating Organization BEN |
|---|-----------------|--------------------|------------|---|---------------------------|
| <input type="checkbox"/> 15476 | | My 2026 Contract | 1/1/2026 | | 116 |
| <input checked="" type="checkbox"/> 15477 | | My FY2026 Contract | 1/1/2026 | | 116 |

Contract Summary - My FY2026 Contract

Contract Number

Establishing FCC #260000001
Form 470

Award Date 1/1/2026

Expiration Date (All
Extensions)

Account Number

Service Provider USAC Service Provider Organization 1 (SPIN: 14010001)

Includes Voluntary
Extensions? No

Remaining Voluntary
Extensions

Total Remaining
Contract Length

Pricing Confidentiality

There is no rule, statute, or other restriction which prohibits publication of the specific pricing information for this contract.

Contract Information (Additional)

What is the service start date?  *

Enter the date when services will start for this Funding Year

What is the date your contract expires for the current term of the contract?  *

FCC Form 471 Help

Show Help

 BACK  CANCEL

 CONTINUE

| | Contract ID | Contract Number | Nickname | Award Date | Creating Organization BEN |
|-------------------------------------|-------------|-----------------|--------------------|------------|---------------------------|
| <input type="checkbox"/> | 15476 | | My 2026 Contract | 1/1/2026 | 116 |
| <input checked="" type="checkbox"/> | 15477 | | My FY2026 Contract | 1/1/2026 | 116 |

Contract Summary - My FY2026 Contract

Contract Number

Establishing FCC #260000001
Form 470

Award Date 1/1/2026

Expiration Date (All
Extensions)

Account Number

Service Provider USAC Service Provider Organization 1 (SPIN: 14010001)

Includes Voluntary
Extensions? No

Remaining Voluntary
Extensions

Total Remaining
Contract Length

Pricing Confidentiality

There is no rule, statute, or other restriction which prohibits publication of the specific pricing information for this contract.

Contract Information (Additional)

What is the service start date? ? *

07/01/2026



Enter the date when services will start for this Funding Year

What is the date your contract expires for the current term of the contract? ? *

mm/dd/yyyy

FCC Form 471 Help

Show Help

A ④ Change the date that services will start, if necessary. The default is the first day of the funding year for which you are applying.

| | Contract ID | Contract Number | Nickname | Award Date | Creating Organization BEN |
|-------------------------------------|-------------|-----------------|--------------------|------------|---------------------------|
| <input type="checkbox"/> | 15476 | | My 2026 Contract | 1/1/2026 | 116 |
| <input checked="" type="checkbox"/> | 15477 | | My FY2026 Contract | 1/1/2026 | 116 |

Contract Summary - My FY2026 Contract

Contract Number

Establishing FCC #260000001
Form 470

Award Date 1/1/2026

Expiration Date (All
Extensions)

Account Number

Service Provider USAC Service Provider Organization 1 (SPIN: 14010001)

Includes Voluntary
Extensions? No

Remaining Voluntary
Extensions

Total Remaining
Contract Length

Pricing Confidentiality

There is no rule, statute, or other restriction which prohibits publication of the specific pricing information for this contract.

Contract Information (Additional)

What is the service start date?  *

07/01/2026 

Enter the date when services will start for this Funding Year

FCC Form 471 Help

Show Help

What is the date your contract expires for the current term of the contract?  *

A ⑤ Enter the contract expiration date
(must be spelled out in the contract)



| | Contract ID | Contract Number | Nickname | Award Date | Creating Organization BEN |
|-------------------------------------|-------------|-----------------|--------------------|------------|---------------------------|
| <input type="checkbox"/> | 15476 | | My 2026 Contract | 1/1/2026 | 116 |
| <input checked="" type="checkbox"/> | 15477 | | My FY2026 Contract | 1/1/2026 | 116 |

Contract Summary - My FY2026 Contract

Contract Number

Establishing FCC #260000001
 Form 470
 Award Date 1/1/2026

Account Number

Service Provider USAC Service Provider Organization 1 (SPIN: 14010001)
 Includes Voluntary Extensions? No

Expiration Date (All Extensions)

Remaining Voluntary Extensions

Total Remaining Contract Length

Pricing Confidentiality

There is no rule, statute, or other restriction which prohibits publication of the specific pricing information for this contract.

Contract Information (Additional)

What is the service start date? ? *

Enter the date when services will start for this Funding Year

What is the date your contract expires for the current term of the contract? ? *

FCC Form 471 Help

Show Help

A ⑥ Click on the “CONTINUE” button to proceed

BACK CANCEL

CONTINUE

skip to page 84 in this guide

*If you chose “TARIFF” on the previous screen....
(rare, but possible)*

B ① If you chose “TARIFF”, enter the number of bids received

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate an FCC Form 470 to your purchasing agreement. Please search for a form below and select one to associate it to the purchasing agreement.

Establishing FCC Form 470

How many bids were received? *

Enter the number of bids that you received for this product or service.

Was an FCC Form 470 posted for the product and/or services you are requesting?

YES NO

FCC Form 471 Help

Show Help

BACK CANCEL CONTINUE

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate an FCC Form 470 to your purchasing agreement. Please search for a form below and select one to associate it to the purchasing agreement.

Establishing FCC Form 470

How many bids were received? *

2

Enter the number of bids that you received for this product or service.

Was an FCC Form 470 posted for the product and/or services you are requesting?

YES NO

 **FCC Form 471 Help** **B** ② Click on the “YES” button to indicate that you posted a Form 470

Show Help

BACK **CANCEL** **CONTINUE**

Basic Information

Entity Information

Funding Requests

Certify

Next, you will associate an FCC Form 470 to your purchasing agreement. Please search for a form below and select one to associate it to the purchasing agreement.

Establishing FCC Form 470

How many bids were received? *

2

Enter the number of bids that you received for this product or service.

Was an FCC Form 470 posted for the product and/or services you are requesting?

YES ✓ NO

Use the search tool below to find the establishing FCC Form 470.

Remember that the services in the contract had to be posted on the FCC Form 470.

Search FCC Forms 470

Search by FCC Form 470 Number

Search by BEN

Search by Nickname (Partial or Full)

B ④ Click on the
“SEARCH” button to
locate forms matching
the entered criteria

Remember you cannot file your Form 471 before the Allowable Contract Date.

B ③ Locate the Form 470 by entering a value in any of the search boxes

NOTE: By default, the BEN for the organization is listed. If you know neither the Form 470 Number nor the Form 470 Nickname, you can simply search by BEN.

[Basic Information](#)[Entity Information](#)**Funding Requests**[Certify](#)

Next, you will associate an FCC Form 470 to your purchasing agreement. Please search for a form below and select one to associate it to the purchasing agreement.

Establishing FCC Form 470

How many bids were received? *

Enter the number of bids that you received for this product or service.

Was an FCC Form 470 posted for the product and/or services you are requesting?

YES ✓ NO

Use the search tool below to find the establishing FCC Form 470.

Remember that the services in the contract had to be posted on the FCC Form 470.

Remember you cannot file your Form 471 before the Allowable Contract Date.

Search FCC Forms 470

Search by FCC Form 470 Number

Search by Nickname (Partial or Full)

Search by BEN

CLEAR FILTERS

SEARCH

If your search terms are unsuccessful, click on the “CLEAR FILTERS” button to remove text entered into the search boxes and then try another search

Results matching the search criteria you used will appear in a list

Was an FCC Form 470 posted for the product and/or services you are requesting?

YES ✓ NO

Use the search tool below to find the establishing FCC Form 470.

Remember that the services in the contract had to be posted on the FCC Form 470.

Remember you cannot file your Form 471 before the Allowable Contract Date.

Search FCC Forms 470

Search by FCC Form 470 Number

Search by Nickname (Partial or Full)

Search by BEN

| <input type="checkbox"/> | FCC Form 470 Number | Nickname |  | Funding Year | BEN | BEN Name | Allowable Contract Date | Service Type |
|--------------------------|---------------------|--------------------|---|--------------|-----|-------------------|-------------------------|--|
| <input type="checkbox"/> | 260000001 | My FY2026 Form 470 | | 2026 | 116 | School District 6 | 7/29/2025 | Data Transmission and/or Internet Access; Internal Connections |

FCC Form 471 Help

B ⑤ Click the check box for the establishing Form 470

Show Help

B ⑥ Then click on the “CONTINUE” button to proceed

Basic Information Entity Information Funding Requests Certify

Next, you will associate a service provider to your purchasing agreement. Please search for a provider below and select one to associate it to the purchasing agreement.

Service Provider

Account Number (e.g., billed telephone number)

B ⑦ Enter the account number if you have one (not required)

If your service provider has given you one or more Account Numbers, please enter them.

Use the search tool below to find the establishing service provider

Search Service Providers

Search by SPIN Search by Name (Full or Partial)

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate a service provider to your purchasing agreement. Please search for a provider below and select one to associate it to the purchasing agreement.

Service Provider

Account Number (e.g., billed telephone number)

If your service provider has given you one or more Account Numbers, please enter them.

Use the search tool below to find the establishing service provider

Search Service Providers

Search by SPIN

Search by Name (Full or Partial)

SPIN numbers are always 9 digits and begin "14"

B 8 Enter the SPIN or name of the service provider

B 9 Click on the "SEARCH" button

BACK CANCEL CONTINUE CLEAR FILTERS SEARCH

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate a service provider to your purchasing agreement. Please search for a provider below and select one to associate it to the purchasing agreement.

Service Provider

Account Number (e.g., billed telephone number)

If your service provider has given you one or more Account Numbers, please enter them.

Use the search tool below to find the establishing service provider

Search Service Providers

Search by SPIN

Search by Name (Full or Partial)

If your search terms are unsuccessful, click on the “CLEAR FILTERS” button to remove text entered into the search boxes and then try another search

 **CLEAR FILTERS** **SEARCH**

BACK **CANCEL** **CONTINUE**

Results matching the search criteria you used will appear in a list

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate a service provider to your purchasing agreement. Please search for a provider below and select one to associate it to the purchasing agreement.

Service Provider

Account Number (e.g., billed telephone number)

If your service provider has given you one or more Account Numbers, please enter them.

Use the search tool below to find the establishing service provider

Search Service Providers

Search by SPIN Search by Name (Full or Partial)

B ⑩ Click the check box for the appropriate service provider

14010001 14010002 14010003

| SPIN | Name | Doing Business As | State |
|----------|--------------------------------------|-------------------|-------|
| 14010001 | USAC Service Provider Organization 1 | | VA |
| 14010002 | USAC Service Provider Organization 2 | | VA |
| 14010003 | USAC Service Provider Organization 3 | | VA |

B ⑪ Click on the “CONTINUE” button

BACK **CANCEL** **CONTINUE**

| | | | |
|--|---------------------------------------|---|---------------------------------|
| Basic Information | Entity Information | Funding Requests | Certify |
| Next, you will identify the start and end dates for the services you are requesting. | | | |
| Dates | | | |
| What is the service start date? <small>?</small> * | | When will the services end? * | |
| 07/01/2026 | <input type="button" value=""/> | <input type="button" value=""/> | <input type="button" value=""/> |
| Enter the date when services will start for this Funding Year | | | |
| <input type="button" value="BACK"/> | <input type="button" value="CANCEL"/> | <input type="button" value="CONTINUE"/> | |

B ⑫ Modify the service start date if necessary, and enter the date services will end

B ⑬ Click on the “CONTINUE” button

B (14) Determine if there is a statute, rule, or other restriction that prohibits pricing transparency

Basic Information Entity Information Funding Requests Certify

Next, you will identify any pricing confidentiality restrictions for the product or services you are requesting.

Pricing Confidentiality

Is there a statute, rule, or other restriction which prohibits publication of the specific pricing information for this contract?

← **A** If there is no prohibition, click on the “NO” button
then go to the next page in this guide

B If there is, click on the “YES” button
then skip to page 70 in this guide

Words of Caution: There must be an actual statute in place. It is not sufficient for the vendor to simply state that their pricing is confidential. When in doubt, click on “NO”!

If there is no restriction (you chose “NO”)....

Basic Information Entity Information **Funding Requests** Certify

Next, you will identify any pricing confidentiality restrictions for the product or services you are requesting.

Pricing Confidentiality

Is there a statute, rule, or other restriction which prohibits publication of the specific pricing information for this contract?

YES NO ✓

B ⑯ A ⑯ Click on the “CONTINUE” button to proceed

If there is a restriction (you chose “YES”)....

B 14 B 1 Provide the type of restriction and the citation, and upload a file that documents the restriction

Basic Information Entity Information Funding Requests Certify

Next, you will identify any pricing confidentiality restrictions for the product or services you are requesting.

Pricing Confidentiality

Is there a statute, rule, or other restriction which prohibits publication of the specific pricing information for this contract?

YES ✓ NO

Restriction Document Upload
You must upload a copy of the document that contains the cited restriction.

What is the type of restriction? *
-- Select a value --

Restriction Citation *

You must provide a citation to the specific rule, statute, contract paragraph etc that contains the restriction.



B 14 B 2 Click on the “CONTINUE” button to proceed

If you chose “MONTH-TO-MONTH” on the previous screen....

(this method is mostly used when extending an existing contract for a short period while transitioning to a new contract or provider for C1 services)

c ① If you chose “MONTH-TO-MONTH”, enter the number of bids received

Basic Information Entity Information Funding Requests Certify

Next, you will associate an FCC Form 470 to your purchasing agreement. Please search for a form below and select one to associate it to the purchasing agreement.

Establishing FCC Form 470

How many bids were received? *

Enter the number of bids that you received for this product or service.

Was an FCC Form 470 posted for the product and/or services you are requesting?

YES NO

FCC Form 471 Help

Show Help

BACK CANCEL CONTINUE

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate an FCC Form 470 to your purchasing agreement. Please search for a form below and select one to associate it to the purchasing agreement.

Establishing FCC Form 470

How many bids were received? *

2

Enter the number of bids that you received for this product or service.

Was an FCC Form 470 posted for the product and/or services you are requesting?

YES NO

 **FCC Form 471 Help** **C** ② Click on the “YES” button to indicate that you posted a Form 470

Show Help

BACK **CANCEL** **CONTINUE**

Basic Information Entity Information Funding Requests Certify

Next, you will associate an FCC Form 470 to your purchasing agreement. Please search for a form below and select one to associate it to the purchasing agreement.

Establishing FCC Form 470

How many bids were received? *

2

Enter the number of bids that you received for this product or service.

Was an FCC Form 470 posted for the product and/or services you are requesting?

YES ✓ NO

Use the search tool below to find the establishing FCC Form 470.

Remember that the services in the contract had to be posted on the FCC Form 470.

Remember you cannot file your Form 471 before the Allowable Contract Date.

c ④ Click on the “SEARCH” button to locate forms matching the entered criteria

c ③ Locate the Form 470 by entering a value in any of the search boxes

NOTE: By default, the BEN for the organization is listed. If you know neither the Form 470 Number nor the Form 470 Nickname, you can simply search by BEN.

Search FCC Forms 470

Search by FCC Form 470 Number

Search by Nickname (Partial or Full)

Search by BEN

116

CLEAR FILTERS SEARCH

[Basic Information](#)[Entity Information](#)[Funding Requests](#)[Certify](#)

Next, you will associate an FCC Form 470 to your purchasing agreement. Please search for a form below and select one to associate it to the purchasing agreement.

Establishing FCC Form 470

How many bids were received? *

Enter the number of bids that you received for this product or service.

Was an FCC Form 470 posted for the product and/or services you are requesting?

 YES ✓ NO

Use the search tool below to find the establishing FCC Form 470.

Remember that the services in the contract had to be posted on the FCC Form 470.

Remember you cannot file your Form 471 before the Allowable Contract Date.

Search FCC Forms 470

Search by FCC Form 470 Number

Search by Nickname (Partial or Full)

Search by BEN

If your search terms are unsuccessful, click on the “CLEAR FILTERS” button to remove text entered into the search boxes and then try another search

Results matching the search criteria you used will appear in a list

Was an FCC Form 470 posted for the product and/or services you are requesting?

YES ✓ NO

Use the search tool below to find the establishing FCC Form 470.

Remember that the services in the contract had to be posted on the FCC Form 470. Remember you cannot file your Form 471 before the Allowable Contract Date.

Search FCC Forms 470

Search by FCC Form 470 Number Search by Nickname (Partial or Full)

Search by BEN

| <input type="checkbox"/> | FCC Form 470 Number | Nickname | ↑ Funding Year | BEN | BEN Name | Allowable Contract Date | Service Type |
|--------------------------|---------------------|--------------------|----------------|-----|-------------------|-------------------------|--|
| <input type="checkbox"/> | 260000001 | My FY2026 Form 470 | 2026 | 116 | School District 6 | 7/29/2025 | Data Transmission and/or Internet Access; Internal Connections |

FCC Form 471 Help c ⑤ Click the check box for the establishing Form 470

c ⑥ Then click on the “CONTINUE” button to proceed CONTINUE

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate a service provider to your purchasing agreement. Please search for a provider below and select one to associate it to the purchasing agreement.

Service Provider

Account Number (e.g., billed telephone number)

|

If your service provider has given you one or more Account Numbers, please enter them.

c ⑦ Enter the account number if you have one (not required)

Use the search tool below to find the establishing service provider

Search Service Providers

Search by SPIN

Search by Name (Full or Partial)

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate a service provider to your purchasing agreement. Please search for a provider below and select one to associate it to the purchasing agreement.

Service Provider

Account Number (e.g., billed telephone number)

If your service provider has given you one or more Account Numbers, please enter them.

Use the search tool below to find the establishing service provider

Search Service Providers

Search by SPIN

Search by Name (Full or Partial)

SPIN numbers are always 9 digits and begin "14"

C 8 Enter the SPIN or name of the service provider

C 9 Click on the "SEARCH" button

BACK CANCEL CONTINUE

CLEAR FILTERS SEARCH

Basic Information Entity Information **Funding Requests** Certify

Next, you will associate a service provider to your purchasing agreement. Please search for a provider below and select one to associate it to the purchasing agreement.

Service Provider

Account Number (e.g., billed telephone number)

If your service provider has given you one or more Account Numbers, please enter them.

Use the search tool below to find the establishing service provider

Search Service Providers

Search by SPIN

Search by Name (Full or Partial)

If your search terms are unsuccessful, click on the “CLEAR FILTERS” button to remove text entered into the search boxes and then try another search

 **CLEAR FILTERS** **SEARCH**

BACK **CANCEL** **CONTINUE**

Results matching the search criteria you used will appear in a list

Basic Information Entity Information Funding Requests Certify

Next, you will associate a service provider to your purchasing agreement. Please search for a provider below and select one to associate it to the purchasing agreement.

Service Provider

Account Number (e.g., billed telephone number)

If your service provider has given you one or more Account Numbers, please enter them.

Use the search tool below to find the establishing service provider

Search Service Providers

Search by SPIN Search by Name (Full or Partial)

C ⑩ Click the check box for the appropriate service provider

14010001 14010002 14010003

| SPIN | Name | Doing Business As | State |
|----------|--------------------------------------|-------------------|-------|
| 14010001 | USAC Service Provider Organization 1 | | VA |
| 14010002 | USAC Service Provider Organization 2 | | VA |
| 14010003 | USAC Service Provider Organization 3 | | VA |

C ⑪ Click on the “CONTINUE” button

| | | | |
|--|---------------------------------------|---|---------------------------------|
| Basic Information | Entity Information | Funding Requests | Certify |
| Next, you will identify the start and end dates for the services you are requesting. | | | |
| Dates | | | |
| What is the service start date? <small>?</small> * | | When will the services end? * | |
| 07/01/2026 | <input type="button" value=""/> | <input type="button" value=""/> | <input type="button" value=""/> |
| Enter the date when services will start for this Funding Year | | | |
| <input type="button" value="BACK"/> | <input type="button" value="CANCEL"/> | <input type="button" value="CONTINUE"/> | |

C ⑫ Modify the service start date if necessary, and enter the date services will end

C ⑬ Click on the “CONTINUE” button

C (14) Determine if there is a statute, rule, or other restriction that prohibits pricing transparency

Basic Information Entity Information Funding Requests Certify

Next, you will identify any pricing confidentiality restrictions for the product or services you are requesting.

Pricing Confidentiality

Is there a statute, rule, or other restriction which prohibits publication of the specific pricing information for this contract?

← A If there is no prohibition, click on the “NO” button
then go to the next page in this guide

B If there is, click on the “YES” button
then skip to page 83 in this guide

Words of Caution: There must be an actual statute in place. It is not sufficient for the vendor to simply state that their pricing is confidential. When in doubt, click on “NO”!

If there is no restriction (you chose “NO”)....

Basic Information Entity Information **Funding Requests** Certify

Next, you will identify any pricing confidentiality restrictions for the product or services you are requesting.

Pricing Confidentiality

Is there a statute, rule, or other restriction which prohibits publication of the specific pricing information for this contract?

YES NO ✓

c ⑯ A ⑯ Click on the “CONTINUE” button to proceed

If there is a restriction (you chose “YES”)....

C ⑯ B ① Provide the type of restriction and the citation, and upload a file that documents the restriction

Basic Information Entity Information Funding Requests Certify

Next, you will identify any pricing confidentiality restrictions for the product or services you are requesting.

Pricing Confidentiality

Is there a statute, rule, or other restriction which prohibits publication of the specific pricing information for this contract?

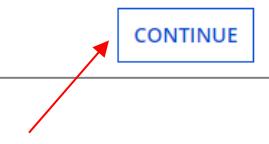
YES ✓ NO

Restriction Document Upload
You must upload a copy of the document that contains the cited restriction.

What is the type of restriction? *
-- Select a value --

Restriction Citation *

You must provide a citation to the specific rule, statute, contract paragraph etc that contains the restriction.



C ⑯ B ② Click on the “CONTINUE” button to proceed

⑨ Determine if this FRN is a fiber request meeting any of the criteria specified

Basic Information

Entity Information

Funding Requests

Certify

Next, you will designate whether this FRN includes a Fiber or Wireless Request.

Fiber Request Key Information

Does this FRN include a request for any of the following eligible broadband options?

- **Special construction.** One-time, upfront costs associated with building out leased lit fiber, leased dark fiber, or a self-provisioned network (i.e. special construction charges), or wireless service; and/or
- **Maintenance and operations.** Costs associated with the maintenance and operations for either a leased dark fiber or self-provisioned network; and/or
- **Network equipment.** Costs associated with the purchase of Network Equipment needed to make leased dark fiber or a self-provisioned network functional (e.g., modulating electronics and other equipment).

If any of the above apply, select "Yes" below.

Select "No" if you are only seeking support for the monthly recurring costs for either a leased lit fiber service or a leased dark fiber service (i.e., recurring payments on a dark fiber lease or IRU), or a wireless service.

Notes:

- If you are seeking support for both the Special Construction, Maintenance and Operation, and/or Network Equipment as well as support for recurring costs associated with leased lit fiber, a dark fiber lease/IRU, or a wireless service then you create multiple FRNs. In each case, you will select a different answer to the Yes/No question based the specific services that are included in that FRN.
- If you select "Yes" below, you should create separate FRNs for special construction charges, maintenance and operations (M&O) charges, and Network Equipment charges. If charges for M&O and Network Equipment are bundled pursuant to a single contract for those products/services, you may use the Network Equipment/M&O FRN option.

A

If it is not a fiber request meeting this criteria, click on the "NO" button
then go to the next page in this guide

FCC Form 471 Help

Show Help

B

If it does meet this criteria, click on the "YES" button
then skip to page 86 in this guide

CONTINUE

If it does not meet the criteria (you chose “NO”)....

Basic Information

Entity Information

Funding Requests

Certify

Next, you will designate whether this FRN includes a Fiber or Wireless Request.

Fiber Request Key Information

Does this FRN include a request for any of the following eligible broadband options?

- **Special construction.** One-time, upfront costs associated with building out leased lit fiber, leased dark fiber, or a self-provisioned network (i.e. special construction charges), or wireless service; and/or
- **Maintenance and operations.** Costs associated with the maintenance and operations for either a leased dark fiber or self-provisioned network; and/or
- **Network equipment.** Costs associated with the purchase of Network Equipment needed to make leased dark fiber or a self-provisioned network functional (e.g., modulating electronics and other equipment).

If any of the above apply, select "Yes" below.

Select "No" if you are only seeking support for the monthly recurring costs for either a leased lit fiber service or a leased dark fiber service (i.e., recurring payments on a dark fiber lease or IRU), or a wireless service.

Notes:

- If you are seeking support for both the Special Construction, Maintenance and Operation, and/or Network Equipment as well as support for recurring costs associated with leased lit fiber, a dark fiber lease/IRU, or a wireless service then you create multiple FRNs. In each case, you will select a different answer to the Yes/No question based the specific services that are included in that FRN.
- If you select "Yes" below, you should create separate FRNs for special construction charges, maintenance and operations (M&O) charges, and Network Equipment charges. If charges for M&O and Network Equipment are bundled pursuant to a single contract for those products/services, you may use the Network Equipment/M&O FRN option.

A ① If you chose “NO”, click on the
“CONTINUE” button to proceed

FCC Form 471 Help

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If it does meet the criteria (you chose “YES”)...

| Basic Information | Entity Information | Funding Requests | Certify |
|--|--------------------|------------------|---------|
| Next, you will designate whether this FRN includes a Fiber or Wireless Request. | | | |
| <h3>Fiber Request Key Information</h3> <p>Does this FRN include a request for any of the following eligible broadband options?</p> <ul style="list-style-type: none">Special construction. One-time, upfront costs associated with building out leased lit fiber, leased dark fiber, or a self-provisioned network (i.e. special construction charges), or wireless service; and/orMaintenance and operations. Costs associated with the maintenance and operations for either a leased dark fiber or self-provisioned network; and/orNetwork equipment. Costs associated with the purchase of Network Equipment needed to make leased dark fiber or a self-provisioned network functional (e.g., modulating electronics and other equipment). <p>If any of the above apply, select "Yes" below.</p> <p>Select "No" if you are only seeking support for the monthly recurring costs for either a leased lit fiber service or a leased dark fiber service (i.e., recurring payments on a dark fiber lease or IRU), or a wireless service.</p> <p>Notes:</p> <ul style="list-style-type: none">If you are seeking support for both the Special Construction, Maintenance and Operation, and/or Network Equipment as well as support for recurring costs associated with leased lit fiber, a dark fiber lease/IRU, or a wireless service then you create multiple FRNs. In each case, you will select a different answer to the Yes/No question based the specific services that are included in that FRN.If you select "Yes" below, you should create separate FRNs for special construction charges, maintenance and operations (M&O) charges, and Network Equipment charges. If charges for M&O and Network Equipment are bundled pursuant to a single contract for those products/services, you may use the Network Equipment/M&O FRN option. <p><input checked="" type="checkbox"/> YES ✓ <input type="checkbox"/> NO</p> <p>Is this FRN supporting new or existing fiber for leased lit fiber, dark fiber, self-provisioned, or new or existing infrastructure for wireless service? *</p> <p><input type="checkbox"/> LIT FIBER <input type="checkbox"/> DARK FIBER <input type="checkbox"/> SELF-PROVISIONED <input type="checkbox"/> WIRELESS</p> | | | |
| <p>B ① If the FRN does meet this criteria, choose the type of fiber that will be requested</p> <p>B ② Then click on the “CONTINUE” button → <input type="button" value="CONTINUE"/></p> | | | |

B ③ Answer the additional questions on the next screen(s) until all fiber questions have been fully completed

Fiber Screen Examples:

Next, you will identify whether this Dark Fiber FRN is Leased or IRU.

Fiber Request Key Information

Is this Leased Dark Fiber or IRU? *

Indefeasible right of use (IRU) is a contractual agreement between a service provider and an applicant for a fiber optic network which gives you ownership and unrestricted use of that fiber.

LEASED DARK FIBER

IRU

Next, you will designate whether the Fiber Request is for Special Construction, Network Equipment, Maintenance & Operations, or both Network Equipment and Maintenance & Operations.

Fiber Request Key Information

Is this FRN for Special Construction, Network Equipment, Maintenance & Operation or both Network Equipment and Maintenance & Operation?  *

SPECIAL CONSTRUCTION

NETWORK EQUIPMENT

MAINTENANCE AND OPERATION

⑩ Provide a description of the service you are requesting and any other information you think USAC would find important such as EPC profile issues

Basic Information Entity Information **Funding Requests** Certify

Narrative

Provide a brief explanation of the products and services that you are requesting, or provide any other relevant information regarding this Funding Request. You should also use this field to describe any updates to your entity data, such as revised student counts, entity relationships, etc. that you were unable to make after the close of the Administrative filing window for profile updates. These changes will be addressed during the application review process.*

Invoicing Method

Please indicate who will be submitting invoices and receiving reimbursement for this funding request*

Applicant - FCC Form 472 (BEAR Form)
 Service Provider - FCC Form 474 (SPI Form)

FCC Form 471 Help

[Show Help](#)

[BACK](#) [CANCEL](#) [SAVE & VIEW FRN\(S\)](#) [SAVE & ADD/MANAGE FRN LINE ITEMS](#)

⑪ Select the invoicing method (BEARs or SPIs) you will be utilizing for this FRN

| Basic Information | Entity Information | Funding Requests | Certify |
|---|------------------------|---|--|
| Narrative <p>Provide a brief explanation of the products and services that you are requesting, or provide any other relevant information regarding this Funding Request. You should also use this field to describe any updates to your entity data, such as revised student counts, entity relationships, etc, that you were unable to make after the close of the Administrative filing window for profile updates. These changes will be addressed during the application review process.*</p> <p>this is my narrative....</p> | | | |
| Invoicing Method <p>Please indicate who will be submitting invoices and receiving reimbursement for this funding request *</p> <p><input type="radio"/> Applicant - FCC Form 472 (BEAR Form) <input type="radio"/> Service Provider - FCC Form 474 (SPI Form)</p> | | <p>NOTE: While USAC has stated that this selection is not binding, there is reason to believe that you will only be able to change your selection by filing a specific request so do your best to answer this accurately</p> | |
| BACK | CANCEL | SAVE & VIEW FRN(S) | SAVE & ADD/MANAGE FRN LINE ITEMS |

Funding Requests

[Basic Information](#)[Entity Information](#)[Funding Requests](#)[Certify](#)

Narrative

Provide a brief explanation of the products and services that you are requesting, or provide any other relevant information regarding this Funding Request. You should also use this field to describe any updates to your entity data, such as revised student counts, entity relationships, etc, that you were unable to make after the close of the Administrative filing window for profile updates. These changes will be addressed during the application review process.*

this is my narrative....

Invoicing Method

Please indicate who will be submitting invoices and receiving reimbursement for this funding request*

- Applicant - FCC Form 472 (BEAR Form)
- Service Provider - FCC Form 474 (SPI Form)

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⑫ Click on the “SAVE & ADD/MANAGE FRN LINE ITEMS” button to finish working on this FRN

[BACK](#) [CANCEL](#)[SAVE & VIEW FRN\(S\)](#)[SAVE & ADD/MANAGE FRN LINE ITEMS](#)

NOTE: You can use the “SAVE & VIEW FRN(S)” button to leave this FRN and view the FRNs you have created so far, but as a best practice finish the FRN you are working on before starting another one to avoid confusion

go to the next page in this guide

Managing FRN Line Items

You will next need to enter the details of the products and services being requested on separate FRN Line Items.

FRN Line Items

An FRN is incomplete until Line Items have been added to identify each specific product and service being requested and its associated costs

The Nickname you entered for this FRN will appear at the top of the form along with the FRN Number

| Basic Information | | Entity Information | | Funding Requests | | Certify | |
|--|----------------------|-------------------------|----------------------------|------------------|-------------------|-----------------------------------|--|
| This page displays all of the funding request line items for this FRN. Click on a line item number below to edit the line items and their recipients of service. | | | | | | | |
| FRN Line Items for FRN #2699000004 - C1 FRN 1 | | | | | | | |
| <input type="checkbox"/> | FRN Line Item Number | Function | Type of Product | Quantity | One-time Quantity | Total Eligible FRN Line Item Cost | |
| You haven't created any FRN Line Items yet. Click the 'Add New FRN Line Item' button to start creating your first FRN Line Item. | | | | | | | |
| ADD NEW FRN LINE ITEM REMOVE FRN LINE ITEM BULK UPLOAD | | | | | | | |
| FCC Form 471 Help Show Help | | | | | | | |
| ① Click on the “ADD NEW FRN LINE ITEM” button | | | | | | | |
| BACK | DISCARD FORM | SAVE & SHARE | SAVE & CONTINUE | | | | |

Guidelines:

- Use a separate line for each different service sought
- If you have several entities receiving the same service but they are delivered at different speeds or for different costs, use a separate line for each

② Select the option that best describes the purpose of this FRN Line Item

Basic Information Entity Information **Funding Requests** Certify

Please enter Product and Service Details Information for this Data Transmission and/or Internet Access Line Item

Product and Service Details for new FRN Line Item for FRN #2699000004 - C1 FRN 1

Show Help for Taxes and USF Fees

Purpose ? *

Internet access service that includes a connection from any applicant site directly to the Internet Service Provider

Data Connection between two or more sites entirely within the applicant's network

Data connection(s) for an applicant's hub site to an Internet Service Provider or state/regional network where Internet access service is billed separately

Internet access service with no circuit (data circuit to ISP state/regional network is billed separately)

Function ? *

Please select a value

> Funding Request Narrative

FCC Form 471 Help

Show Help

CANCEL **SAVE & CONTINUE**

Basic Information Entity Information **Funding Requests** Certify

Please enter Product and Service Details Information for this Data Transmission and/or Internet Access Line Item

Product and Service Details for new FRN Line Item for FRN #2699000004 - C1 FRN 1

Show Help for Taxes and USF Fees

Purpose ? *

Internet access service that includes a connection from any applicant site directly to the Internet Service Provider

Data Connection between two or more sites entirely within the applicant's network

Data connection(s) for an applicant's hub site to an Internet Service Provider or state/regional network where Internet access service is billed separately

Internet access service with no circuit (data circuit to ISP state/regional network is billed separately)

Function ? *

Please select a value

Please select a value

Fiber

Copper

Wireless

Other

Miscellaneous

CANCEL

SAVE & CONTINUE



③ Select the function of the request

Basic Information Entity Information **Funding Requests** Certify

Please enter Product and Service Details Information for this Data Transmission and/or Internet Access Line Item

Product and Service Details for new FRN Line Item for FRN #2699000004 - C1 FRN 1

Show Help for Taxes and USF Fees

Purpose ? *

- Internet access service that includes a connection from any applicant site directly to the Internet Service Provider
- Data Connection between two or more sites entirely within the applicant's network
- Data connection(s) for an applicant's hub site to an Internet Service Provider or state/regional network where Internet access service is billed separately
- Internet access service with no circuit (data circuit to ISP state/regional network is billed separately)

Function ? *

Fiber

Type of Connection *

Please select a value

④ Select the type of connection

> Funding Request Narrative

FCC Form 471 Help

Show Help

CANCEL **SAVE & CONTINUE**

[Basic Information](#)[Entity Information](#)[Funding Requests](#)[Certify](#)

Please enter Product and Service Details Information for this Data Transmission and/or Internet Access Line Item

Product and Service Details for new FRN Line Item for FRN #2699000004 - C1 FRN 1

[Show Help for Taxes and USF Fees](#)**Purpose ? ***

- Internet access service that includes a connection from any applicant site directly to the Internet Service Provider
- Data Connection between two or more sites entirely within the applicant's network
- Data connection(s) for an applicant's hub site to an Internet Service Provider or state/regional network where Internet access service is billed separately
- Internet access service with no circuit (data circuit to ISP state/regional network is billed separately)

Function ? *

Fiber

Type of Connection *

Ethernet

▼ Funding Request Narrative

⑤ To add text to your narrative, FIRST click on the “Funding Request Narrative” header to expand the section.

Please use this field to add information specific to this line item to the funding request's narrative if you wish. The narrative is shared by the funding request and all of its line items.*

this sentence is about the entire FRN

FCC Form 471 Help[Show Help](#)[CANCEL](#)[SAVE & CONTINUE](#)

[Basic Information](#)[Entity Information](#)**Funding Requests**[Certify](#)

Please enter Product and Service Details Information for this Data Transmission and/or Internet Access Line Item

Product and Service Details for new FRN Line Item for FRN #2699000004 - C1 FRN 1

[Show Help for Taxes and USF Fees](#)**Purpose ? ***

- Internet access service that includes a connection from any applicant site directly to the Internet Service Provider
- Data Connection between two or more sites entirely within the applicant's network
- Data connection(s) for an applicant's hub site to an Internet Service Provider or state/regional network where Internet access service is billed separately
- Internet access service with no circuit (data circuit to ISP state/regional network is billed separately)

Function ? *

Fiber

Type of Connection *

Ethernet

▼ Funding Request Narrative

Please use this field to add information specific to this line item to the funding request's narrative if you wish. The narrative is shared by the funding request and all of its line items.*

this sentence is about the entire FRN

and this is about line 1 of the FRN

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[Show Help](#)

⑦ Click on the “SAVE & CONTINUE” button to proceed

[CANCEL](#)[SAVE & CONTINUE](#)

⑧ Enter bandwidth upload and download speeds and any other requested info

NOTE: Default values may populate the form as you complete it

Basic Information Entity Information **Funding Requests** Certify

Please enter Bandwidth Speed Information for this Data Transmission and/or Internet Access Line Item

Bandwidth Speed for new FRN Line Item for FRN #269900004 - C1 FRN 1

Bandwidth Download Speed *

Bandwidth Download Units *

Bandwidth Upload Speed *

Please specify the upload speed if it is different than the download speed.

Bandwidth Upload Units *

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Show Help

BACK **CANCEL** **SAVE & CONTINUE**

School District 6 (BEN: 116) - My FY2026 C1 Form 471 - Form # 261000003

Last Saved: 1/15/2026 10:52 AM EST

[Basic Information](#)[Entity Information](#)[Funding Requests](#)[Certify](#)

Please enter Bandwidth Speed Information for this Data Transmission and/or Internet Access Line Item

Bandwidth Speed for new FRN Line Item for FRN #269900004 - C1 FRN 1

Bandwidth Download Speed***Burstable Bandwidth?** **Bandwidth Download Units*****Bandwidth Upload Speed***

Please specify the upload speed if it is different than the download speed.

Bandwidth Upload Units*

FCC Form 471 Help

[Show Help](#)[BACK](#) [CANCEL](#)[SAVE & CONTINUE](#)

⑨ Click on the “SAVE & CONTINUE” button

⑩ Provide the additional requested information about the connection

| Basic Information | Entity Information | Funding Requests | Certify |
|--|---------------------------------------|--|---------|
| Please enter Connection Information for this Data Transmission and/or Internet Access Line Item | | | |
| Connection Information for new FRN Line Item for FRN #2699000004 - C1 FRN 1 | | | |
| Is this a direct connection to a single school, library or a NIF for Internet access? <small>?</small> * | | Does this include firewall services? * | |
| <p>Note: If the request is for direct connections, you will be required to allocate the total number of lines (monthly quantity) among the recipients listed for this line item.</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> | | | |
| Is this a connection between eligible schools, libraries and NIFs (i.e., a connection that provides a "Wide area network")? <small>?</small> * | | | |
| <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> | | | |
| FCC Form 471 Help | | | |
| Show Help | | | |
| <input type="button" value="BACK"/> | <input type="button" value="CANCEL"/> | <input type="button" value="SAVE & CONTINUE"/> | |

Connection Information Screen Example:

| Basic Information | Entity Information | Funding Requests | Certify |
|--|--|--|--|
| Please enter Connection Information for this Data Transmission and/or Internet Access Line Item | | | |
| Connection Information for new FRN Line Item for FRN #2699000004 - C1 FRN 1 | | | |
| Is this a direct connection to a single school, library or a NIF for Internet access? <small>?</small> * | | Does this include firewall services? * | |
| <small>Note: If the request is for direct connections, you will be required to allocate the total number of lines (monthly quantity) among the recipients listed for this line item.</small> | | <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO ✓ |
| <input checked="" type="checkbox"/> YES ✓ | <input type="checkbox"/> NO | | |
| Is this a connection between eligible schools, libraries and NIFs (i.e., a connection that provides a "Wide area network")? <small>?</small> * | | | |
| <input type="checkbox"/> YES | <input checked="" type="checkbox"/> NO ✓ | | |
| FCC Form 471 Help | | | |
| Show Help | | | |
| <input type="button" value="BACK"/> | <input type="button" value="CANCEL"/> | <input type="button" value="SAVE & CONTINUE"/> | |

⑪ Then click on the “SAVE & CONTINUE” button to proceed

| Basic Information | | Entity Information | | Funding Requests | | Certify | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|------------|------------------------|--|-----------------------------|--|---|--|---------------------------------------|------------|--------------------------------|--|--|---|---|------|--------------------------------|---|--|--|--|--|---------------|--|--------------------|--|-------------------------------|--|-----------------------------|------------|-------------------|--|-------------------------------|--|--|--|
| <p>Please enter Cost Information for this Data Transmission and/or Internet Access Line Item. All fields in the grid below are required. Please enter zero if funds are not requested for that field.</p> <p>Cost Calculation for new FRN Line Item for FRN #269900004 - C1 FRN 1</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>Monthly Cost</td> <td></td> </tr> <tr> <td>Monthly Recurring Unit Cost</td> <td></td> </tr> <tr> <td>Monthly Recurring Unit Ineligible Costs</td> <td></td> </tr> <tr> <td>Monthly Recurring Unit Eligible Costs</td> <td>Calculated</td> </tr> <tr> <td>Monthly Quantity</td> <td></td> </tr> <tr> <td>Total Monthly Eligible Recurring Costs</td> <td>=</td> </tr> <tr> <td>Months of Service</td> <td>x 12</td> </tr> <tr> <td>Total Eligible Recurring Costs</td> <td>=</td> </tr> </table> | | Monthly Cost | | Monthly Recurring Unit Cost | | Monthly Recurring Unit Ineligible Costs | | Monthly Recurring Unit Eligible Costs | Calculated | Monthly Quantity | | Total Monthly Eligible Recurring Costs | = | Months of Service | x 12 | Total Eligible Recurring Costs | = | | | <table border="1"> <tr> <td>One-Time Cost</td> <td></td> </tr> <tr> <td>One-time Unit Cost</td> <td></td> </tr> <tr> <td>One-time Ineligible Unit Cost</td> <td></td> </tr> <tr> <td>One-time Eligible Unit Cost</td> <td>Calculated</td> </tr> <tr> <td>One-time Quantity</td> <td></td> </tr> <tr> <td>Total Eligible One-time Costs</td> <td></td> </tr> </table> | | One-Time Cost | | One-time Unit Cost | | One-time Ineligible Unit Cost | | One-time Eligible Unit Cost | Calculated | One-time Quantity | | Total Eligible One-time Costs | | | |
| Monthly Cost | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Monthly Recurring Unit Cost | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Monthly Recurring Unit Ineligible Costs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Monthly Recurring Unit Eligible Costs | Calculated | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Monthly Quantity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Monthly Eligible Recurring Costs | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Months of Service | x 12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Eligible Recurring Costs | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| One-Time Cost | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| One-time Unit Cost | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| One-time Ineligible Unit Cost | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| One-time Eligible Unit Cost | Calculated | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| One-time Quantity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Eligible One-time Costs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>Summary</td> <td></td> </tr> <tr> <td>Total Eligible Recurring Costs</td> <td></td> </tr> <tr> <td>Total Eligible One-time Costs</td> <td></td> </tr> <tr> <td>Pre-Discount Extended Eligible Line Item Cost</td> <td>=</td> </tr> </table> | | | | | | | | Summary | | Total Eligible Recurring Costs | | Total Eligible One-time Costs | | Pre-Discount Extended Eligible Line Item Cost | = | | | | | | | | | | | | | | | | | | | | |
| Summary | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Eligible Recurring Costs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Eligible One-time Costs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pre-Discount Extended Eligible Line Item Cost | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| More Help with the Costs Above | | | | | | SAVE & CONTINUE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FCC Form 471 Help | | | | | | Show Help | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| BACK | | CANCEL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

⑫ Enter the Cost Calculations for this FRN Line Item based on what you have contracted with the provider, removing any ineligible amounts
(see the next slide for more information)

NOTE: All fields must be completed. Enter zeroes in fields for which you have no requested costs.

Fields

Monthly Recurring Unit Cost: Enter the total monthly cost for this service for each connection. If the cost of service fluctuates from month to month, use the average of past bills to estimate the monthly cost.

Monthly Recurring Unit Ineligible Costs: Enter the total cost associated with ANY ineligible services, entities, or uses included in your monthly charges.

Monthly Quantity: The number of connections that have this total recurring cost.

One-time Unit Cost: Enter one-time or non-recurring costs for the product or service. For example, installation charges for eligible services and equipment are eligible.

One-time Unit Ineligible Cost: Enter the total cost associated with ANY ineligible services, entities, or uses included in your one-time charges.

One-time Quantity: The number of connections that have this total one-time cost.

| Basic Information | Entity Information | Funding Requests | Certify |
|--|--------------------|---|---------------|
| Please enter Cost Information for this Data Transmission and/or Internet Access Line Item. All fields in the grid below are required. Please enter zero if funds are not requested for that field. | | | |
| Cost Calculation for FRN Line Item #2699000004.001 | | | |
| Monthly Cost | | One-Time Cost | |
| Monthly Recurring Unit Cost | \$500.00 | One-time Unit Cost | \$100.00 |
| Monthly Recurring Unit Ineligible Costs | \$0.00 | One-time Ineligible Unit Cost | \$50.00 |
| Monthly Recurring Unit Eligible Costs | = \$500.00 | One-time Eligible Unit Cost | = \$50.00 |
| Monthly Quantity | 2 | One-time Quantity | 2 |
| Total Monthly Eligible Recurring Costs | = \$1,000.00 | Total Eligible One-time Costs | = \$100.00 |
| Months of Service | x 12 | Summary | |
| Total Eligible Recurring Costs | = \$12,000.00 | Total Eligible Recurring Costs | \$12,000.00 |
| | | Total Eligible One-time Costs | + \$100.00 |
| | | Pre-Discount Extended Eligible Line Item Cost | = \$12,100.00 |
| More Help with the Costs Above | | | |
| FCC Form 471 Help | | | |
| Show Help | | | |
| <input type="button" value="BACK"/> <input type="button" value="CANCEL"/> | | 13 Click on the “SAVE & CONTINUE” button to proceed | |
| | | <input type="button" value="SAVE & CONTINUE"/> | |

Managing Recipients

For every Line Item created for each FRN, you must identify the entities receiving that particular service.

The FRN Number

Select Recipients of Service for FRN Line Item **#2699000004.001**

The FRN Line Number

School District 6 (BEN: 116) - My FY2026 C1 Form 471 - Form # 261000003

Last Saved: 1/15/2026 1:35 PM EST

Basic Information

Entity Information

Funding Requests

Certify

Next, you will select Recipients of Service for your Line Item

Manage Recipients of Service

Is every entity for this organization receiving service?

YES ✓ NO

Selected Entities

Please select the organizations you wish to include as recipients of service for this FRN line item and click the Add button.

| BEN | BEN Name |
|-----|----------------------------|
| 117 | School District 6 School A |
| 118 | School District 6 School B |
| 119 | School District 6 NIF |

FCC Form 471 Help

[Show Help](#)

[BACK](#) [CANCEL](#)

[SAVE & CONTINUE](#)

① Determine if every entity in your profile (schools and NIFs) will be receiving this particular service

- A If every entity will receive the service, choose the “YES” button (default option)
then go to the next page in this guide
- B If only some entities will receive the service, click on the “NO” button
then skip to page 109 in this guide

Basic Information Entity Information **Funding Requests** Certify

Next, you will select Recipients of Service for your Line Item

Manage Recipients of Service

Is every entity for this organization receiving service?

YES ✓ NO

Selected Entities

Please select the organizations you wish to include as recipients of service for this FRN line item and click the Add button.

| BEN | BEN Name |
|-----|----------------------------|
| 117 | School District 6 School A |
| 118 | School District 6 School B |
| 119 | School District 6 NIF |

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Show Help

BACK CANCEL SAVE & CONTINUE

If all entities are receiving the service (you chose “YES”)....

| Basic Information | Entity Information | Funding Requests | Certify |
|---|----------------------------|-------------------------------------|---------|
| Next, you will select Recipients of Service for your Line Item | | | |
| Manage Recipients of Service | | | |
| Is every entity for this organization receiving service? | | | |
| <input checked="" type="checkbox"/> YES ✓ <input type="checkbox"/> NO | | | |
| Selected Entities | | | |
| Please select the organizations you wish to include as recipients of service for this FRN line item and click the Add button. | | | |
| BEN | BEN Name | | |
| 117 | School District 6 School A | | |
| 118 | School District 6 School B | | |
| 119 | School District 6 NIF | | |
| FCC Form 471 Help | | | |
| Show Help | | | |
| BACK | CANCEL | SAVE & CONTINUE | |

A ① If you chose “YES” (the default), click on the “SAVE & CONTINUE” button to proceed

If only some are receiving the service (you chose “NO”)...

Basic Information Entity Information **Funding Requests** Certify

Next, you will select Recipients of Service for your Line Item

Manage Recipients of Service

Is every entity for this organization receiving service?

YES NO ✓

You can use the search box to locate an entity by entering its Billed Entity Number

All Entities

Search by Entity Number (Partial or Full) -- Please enter an entity number (at least 3 characters to enable partial search) --

Search by Entity Name (Partial or Full) -- Please enter an entity name (at least 3 characters to enable partial search) --

APPLY FILTERS **CLEAR FILTERS**

Please select the organizations you wish to include as recipients of service for this FRN line item and click the Add button.

| <input type="checkbox"/> | BEN | BEN Name |
|--------------------------|-----|----------------------------|
| <input type="checkbox"/> | 117 | School District 6 School A |
| <input type="checkbox"/> | 118 | School District 6 School B |
| <input type="checkbox"/> | 119 | School District 6 NIF |

Selected Entities

B ① If you selected “NO”, you must now check the box for each entity that will receive this service

| <input type="checkbox"/> | Entity # | Entity Name |
|--------------------------|----------|-------------|
| No items available | | |

Recipients

Basic Information Entity Information **Funding Requests** Certify

Next, you will select Recipients of Service for your Line Item

Manage Recipients of Service

Is every entity for this organization receiving service?

All Entities

Search by Entity Number (Partial or Full)

Search by Entity Name (Partial or Full)

Please select the organizations you wish to include as recipients of service for this FRN line item and click the Add button.

| <input type="checkbox"/> | BEN | BEN Name |
|-------------------------------------|-----|----------------------------|
| <input checked="" type="checkbox"/> | 117 | School District 6 School A |
| <input checked="" type="checkbox"/> | 118 | School District 6 School B |
| <input type="checkbox"/> | 119 | School District 6 NIF |

B ② Then click on the “ADD” button 

Selected Entities

| <input type="checkbox"/> | Entity # | Entity Name |
|--------------------------|----------|-------------|
| No items available | | |

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Recipients

Basic Information Entity Information **Funding Requests** Certify

Next, you will select Recipients of Service for your Line Item

Manage Recipients of Service

Is every entity for this organization receiving service?

All Entities

Search by BEN

Please select the organizations you wish to include as recipients of service for this FRN and click the Add button. You can find all entities in a school district or library system by entering the district or system entity number in the field above.

| <input type="checkbox"/> | BEN | BEN Name |
|--------------------------|-----|----------------------------|
| <input type="checkbox"/> | 117 | School District 6 School A |
| <input type="checkbox"/> | 118 | School District 6 School B |
| <input type="checkbox"/> | 119 | School District 6 NIF |

Selected Entities *Selected entities will be listed here*

| <input type="checkbox"/> | BEN | BEN Name |
|--------------------------|-----|----------------------------|
| <input type="checkbox"/> | 117 | School District 6 School A |

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Show Help

B ③ Click on the “SAVE & CONTINUE” button to proceed

go to the next page in this guide

If you need to remove an entity, select it and then click on the “REMOVE” button

② Review the recipients of service listed for this Line Item

Recipients of Service Screen Examples:

| Basic Information | | Entity Information | | Funding Requests | | Certify | |
|--|--|----------------------------|--|------------------|--|---------|--|
| Next, you will review the Recipients Of Service selected for this line item. If any updates are needed, please go back to the previous page and update the selected Recipients of Service accordingly. | | | | | | | |
| Recipients of Service for FRN Line Item #2699000004.001 | | | | | | | |
| Entity # | | Entity Name | | | | | |
| 117 | | School District 6 School A | | | | | |
| 118 | | School District 6 School B | | | | | |

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[BACK](#) [CANCEL](#) [SAVE & CONTINUE](#)

What displays on this screen will determine your next action:

A If you see a basic summary screen, click on the “SAVE & CONTINUE” button
then skip to page 119 in this guide

| Basic Information | | Entity Information | | Funding Requests | | Certify | |
|---|----------|----------------------------|--|-------------------------|--|---------|--|
| Next, you will allocate lines for your Recipients of Service | | | | | | | |
| Recipients of Service for FRN Line Item #2699000004.001 | | | | | | | |
| Please allocate the 0 line(s) you have requested for this line item to the entity(ies) below. | | | | | | | |
| Select the entity(ies) in the grid below and then click the Edit Number of Lines button to edit the number of lines allocated to each BEN. Please note, you can also select the checkbox in the upper lefthand corner of the grid to select all entities on the current page of the grid. | | | | | | | |
| <input type="checkbox"/> | Entity # | Entity Name | | Number of Lines per BEN | | | |
| <input type="checkbox"/> | 117 | School District 6 School A | | 1 | | | |
| <input type="checkbox"/> | 118 | School District 6 School B | | 1 | | | |

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[Show Help](#)

[BACK](#) [CANCEL](#) [EDIT NUMBER OF LINES](#) [SAVE & CONTINUE](#)

B If you see details about the number of lines, further action may be required
go to the next page in this guide

If you need to allocate lines....

B (1)

You are requesting a service that requires you to properly allocate the number of lines per recipient of service (the Purpose and Connection Information for this FRN Line Item determines whether or not you are prompted to allocate lines)

If the total lines do not match the total allocated across the entities, you will need to distribute the specific services for each selected recipient

| Basic Information | | Entity Information | Funding Requests | Certify |
|---|---------------|----------------------------|------------------|-------------------------|
| Next, you will allocate lines for your Recipients of Service | | | | |
| Recipients of Service for FRN Line Item #2699000004.001 | | | | |
| Please allocate the 1 line(s) you have requested for this line item to the entity(ies) below. | | | | |
| <i>total number of lines remaining un-allocated if this number is not 0, something is wrong</i> | | | | |
| Select the entity(ies) in the grid below and then click the Edit Number of Lines button to edit the number of lines allocated to each BEN. Please note, you can also select the checkbox in the upper lefthand corner of the grid to select all entities on the current page of the grid. | | | | |
| <input type="checkbox"/> | Entity # | Entity Name | 1 | Number of Lines per BEN |
| <input type="checkbox"/> | 117 | School District 6 School A | 1 | |
| EDIT NUMBER OF LINES | | | | |
| FCC Form 471 Help | | | | |
| Show Help | | | | |
| BACK | CANCEL | SAVE & CONTINUE | | |

An error message will display if you try to continue before you have fully allocated the total number of requested lines

Basic Information Entity Information **Funding Requests** Certify

Next, you will allocate lines for your Recipients of Service

Recipients of Service for FRN Line Item #2699000004.001

Please allocate the 1 line(s) you have requested for this line item to the entity(ies) below.

Select the entity(ies) in the grid below and then click the Edit Number of Lines button to edit the number of lines allocated to each BEN. Please note, you can also select the checkbox in the upper lefthand corner of the grid to select all entities on the current page of the grid.

| <input type="checkbox"/> | Entity # | Entity Name | <input type="button" value="↑"/> | Number of Lines per BEN |
|--------------------------|----------|----------------------------|----------------------------------|---|
| <input type="checkbox"/> | 117 | School District 6 School A | <input type="button" value="1"/> | <input type="button" value="EDIT NUMBER OF LINES"/> |

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[Show Help](#)

! You have allocated less lines than requested for this line item. Please update the number of lines allocated above to equal the number of lines requested.

You will need to properly distribute all lines across the entities receiving the service for this FRN Line Item

***NOTE:** Another possibility for this error is that you entered a quantity that does not match the number of recipients*

Basic Information Entity Information **Funding Requests** Certify

Next, you will allocate lines for your Recipients of Service

Recipients of Service for FRN Line Item #2699000004.001

Please allocate the **2** line(s) you have requested for this line item to the entity(ies) below.

Select the entity(ies) in the grid below and then click the Edit Number of Lines button to edit the number of lines allocated to each BEN. Please note, you can also select the checkbox in the upper lefthand corner of the grid to select all entities on the current page of the grid.

| <input checked="" type="checkbox"/> | Entity # | Entity Name | <input type="button" value="↑"/> | Number of Lines per BEN |
|-------------------------------------|----------|----------------------------|----------------------------------|-------------------------|
| <input checked="" type="checkbox"/> | 117 | School District 6 School A | | |
| <input checked="" type="checkbox"/> | 118 | School District 6 School B | | |

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[BACK](#) [CANCEL](#) [EDIT NUMBER OF LINES](#) [SAVE & CONTINUE](#)

B ② To modify the line distribution to the recipients, select the check box for each recipient to be modified or the check box at the top of the column to select all recipients, then click on the “EDIT NUMBER OF LINES” button

B ③ Edit the number of lines allocated to each recipient appropriately

Basic Information

Entity Information

Funding Requests

Certify

Next, you will edit the number of lines allocated to the recipient(s) below

If two or more entities are sharing telecommunications line(s), you can allocate the single line equally among the entities. For example, if two entities share a single circuit, indicate 0.5 line per entity.

Edit Number of Lines Allocated to the Recipient(s)

Please allocate the line(s) you have requested for this line item to the entity(ies) below.

1. School District 6 School A (BEN: 117)

2. School District 6 School B (BEN: 118)

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[SAVE & CONTINUE](#)

[Basic Information](#)[Entity Information](#)[Funding Requests](#)[Certify](#)

Next, you will edit the number of lines allocated to the recipient(s) below

If two or more entities are sharing telecommunications line(s), you can allocate the single line equally among the entities. For example, if two entities share a single circuit, indicate 0.5 line per entity.

Edit Number of Lines Allocated to the Recipient(s)

Please allocate the line(s) you have requested for this line item to the entity(ies) below.

1. School District 6 School A (BEN: 117)

2. School District 6 School B (BEN: 118)

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B ④ Then click on the “SAVE & CONTINUE” button

B ⑤ Repeat as necessary until all requested lines have been fully distributed to the recipients of service

Basic Information Entity Information **Funding Requests** Certify

Next, you will allocate lines for your Recipients of Service

Recipients of Service for FRN Line Item #2699000004.001

Please allocate the **0** line(s) you have requested for this line item to the entity(ies) below. *⇒ 0 lines left to allocate = ↪ ↪*

Select the entity(ies) in the grid below and then click the Edit Number of Lines button to edit the number of lines allocated to each BEN. Please note, you can also select the checkbox in the upper lefthand corner of the grid to select all entities on the current page of the grid.

| <input type="checkbox"/> | Entity # | Entity Name | <input type="button" value="↑ Number of Lines per BEN"/> |
|--------------------------|----------|----------------------------|--|
| <input type="checkbox"/> | 117 | School District 6 School A | <input type="text" value="1"/> |
| <input type="checkbox"/> | 118 | School District 6 School B | <input type="text" value="1"/> |

EDIT NUMBER OF LINES

FCC Form 471 Help

[Show Help](#)

BACK **CANCEL** **SAVE & CONTINUE**

B ⑥ Click on the “SAVE & CONTINUE” button to proceed

Wrapping Up the FRN

After completing a Line Item, each Line Item that has been created for this FRN will display in a table

Wrapping Up

① Continue adding FRN line items using the steps outlined until all services you wish to add to this FRN have been listed

To create another Line Item, click on the “ADD NEW FRN LINE ITEM” button

To edit an existing Line Item, click on the link for it

To delete an existing Line Item, click the check box for it and click on the “REMOVE FRN LINE ITEM” button

| Basic Information | | Entity Information | | Funding Requests | | Certify |
|--|----------------------|-------------------------|----------------------------|------------------|-------------------|-----------------------------------|
| This page displays all of the funding request line items for this FRN. Click on a line item number below to edit the line items and their recipients of service. | | | | | | |
| FRN Line Items for FRN #2699000004 - C1 FRN 1 | | | | | | |
| <input type="checkbox"/> | FRN Line Item Number | Function | Type of Product | Quantity | One-time Quantity | Total Eligible FRN Line Item Cost |
| <input type="checkbox"/> | 2699000004.001 | Fiber | Ethernet | 2 | 2 | \$12,100.00 |
| ADD NEW FRN LINE ITEM REMOVE FRN LINE ITEM BULK UPLOAD | | | | | | |
| FCC Form 471 Help | | | | | | |
| Show Help | | | | | | |
| ② Click on the “SAVE & CONTINUE” button when your Line Items for this FRN are complete | | | | | | |
| BACK | DISCARD FORM | SAVE & SHARE | SAVE & CONTINUE | | | |

After completing an FRN, each FRN that has been created for this form will display in a table

Wrapping Up

③ Continue adding FRNs / FRN line items using the steps outlined until all services you wish to add to this **form** have been listed

To create another FRN, click on the “ADD FRN” button

To work with an existing FRN, click the check box for it and ...

- Click on the “EDIT FRN” button to edit the high level FRN information*
- Click on the “REMOVE FRN” button to delete the FRN*
- Click on the “MANAGE FRN LINE ITEMS” button to edit the Line Items*

| Basic Information | | Entity Information | | Funding Requests | | Certify | |
|--|------------------------------|----------------------------------|-------------------------------------|--------------------------|-----------------|---------|--|
| This page displays all of the funding requests for this application. From here you can create a new FRN, or edit, delete, or manage the line items of an existing one. | | | | | | | |
| Funding Requests | | | | | | | |
| To create or update specific FRN Line Item(s), please click on the FRN number hyperlink. | | | | | | | |
| <input type="checkbox"/> | FRN | <input type="down"/> | Nickname | Number of FRN Line Items | FRN Calculation | | |
| <input type="checkbox"/> | 2699000004 | | C1 FRN 1 | 1 | \$9,680.00 | | |
| <div style="text-align: right;">ADD FRN EDIT FRN REMOVE FRN MANAGE FRN LINE ITEMS</div> | | | | | | | |
| FCC Form 471 Help | | | | | | | |
| Show Help | | | | | | | |
| BACK | DISCARD FORM | SAVE & SHARE | REVIEW FCC FORM 471 | | | | |

Wrapping Up

You will need to create separate FRNs in the following situations:

| Situation | Explanation |
|---------------------------------|--|
| Different agreement types | services arranged under a contract must appear on a separate FRN than month-to-month services |
| Different contracts / providers | if you have multiple contracts either with the same provider or with different providers, then a separate FRN must be created for each contract |
| Different service types | different service types require separate FRNs <i>example: a switch (Internal Connections) and the license providing basic maintenance of that switch (Basic Maintenance of Internal Connections) must appear on separate FRNs</i> |
| Different service start dates | different start dates require separate FRNs |
| Different service end dates | different end dates require separate FRNs |

Wrapping Up

④ In the Funding Requests Summary table, for each FRN you have created, click on the link for the dollar amount displayed in the “FRN Calculation” column

Basic Information Entity Information **Funding Requests** Certify

This page displays all of the funding requests for this application. From here you can create a new FRN, or edit, delete, or manage the line items of an existing one.

Funding Requests

To create or update specific FRN Line Item(s), please click on the FRN number hyperlink.

| <input type="checkbox"/> | FRN | <input type="button" value="↓"/> | Nickname | Number of FRN Line Items | FRN Calculation |
|--------------------------|------------|----------------------------------|----------|--------------------------|----------------------------|
| <input type="checkbox"/> | 2699000004 | | C1 FRN 1 | 1 | \$9,680.00 |

[ADD FRN](#) [EDIT FRN](#) [REMOVE FRN](#) [MANAGE FRN LINE ITEMS](#)

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A summary of the total amounts requested for that FRN displays

| Basic Information | Entity Information | Funding Requests | Certify | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--------------------|------------------|---------|---------------------------------|------------|-----------------------------------|------------|--|--------------|-----------------------------------|------|---|---------------|--|--|------------------------|--|---|-------------|--|------------|----------------------------|---------------|---------------|-----|----------------------------|--------------|
| Below is the detailed cost information for all line items within the selected FRN. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FRN Calculation for FRN #269900004 - C1 FRN 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>Monthly Charges</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Monthly Recurring Charges</td> <td>\$1,000.00</td> </tr> <tr> <td>Total Monthly Ineligible Charges</td> <td>- \$0.00</td> </tr> <tr> <td>Total Monthly Eligible Charges</td> <td>= \$1,000.00</td> </tr> <tr> <td>Total Number of Months of Service</td> <td>x 12</td> </tr> <tr> <td>Total Eligible Pre-Discount Recurring Charges</td> <td>= \$12,000.00</td> </tr> </tbody> </table> | | Monthly Charges | | Total Monthly Recurring Charges | \$1,000.00 | Total Monthly Ineligible Charges | - \$0.00 | Total Monthly Eligible Charges | = \$1,000.00 | Total Number of Months of Service | x 12 | Total Eligible Pre-Discount Recurring Charges | = \$12,000.00 | <table border="1"> <thead> <tr> <th>Total Requested Amount</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Eligible Pre-Discount Recurring Charges</td> <td>\$12,000.00</td> </tr> <tr> <td>Total Eligible Pre-Discount One-Time Charges</td> <td>+ \$100.00</td> </tr> <tr> <td>Total Pre-Discount Charges</td> <td>= \$12,100.00</td> </tr> <tr> <td>Discount Rate</td> <td>80%</td> </tr> <tr> <td>Funding Commitment Request</td> <td>= \$9,680.00</td> </tr> </tbody> </table> | | Total Requested Amount | | Total Eligible Pre-Discount Recurring Charges | \$12,000.00 | Total Eligible Pre-Discount One-Time Charges | + \$100.00 | Total Pre-Discount Charges | = \$12,100.00 | Discount Rate | 80% | Funding Commitment Request | = \$9,680.00 |
| Monthly Charges | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Monthly Recurring Charges | \$1,000.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Monthly Ineligible Charges | - \$0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Monthly Eligible Charges | = \$1,000.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Number of Months of Service | x 12 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Eligible Pre-Discount Recurring Charges | = \$12,000.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Requested Amount | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Eligible Pre-Discount Recurring Charges | \$12,000.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Eligible Pre-Discount One-Time Charges | + \$100.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Pre-Discount Charges | = \$12,100.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Discount Rate | 80% | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Funding Commitment Request | = \$9,680.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>One-Time Charges</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total One-Time Charges</td> <td>\$200.00</td> </tr> <tr> <td>Total Ineligible One-Time Charges</td> <td>- \$100.00</td> </tr> <tr> <td>Total Eligible Pre-Discount One-Time Charges</td> <td>= \$100.00</td> </tr> </tbody> </table> | | One-Time Charges | | Total One-Time Charges | \$200.00 | Total Ineligible One-Time Charges | - \$100.00 | Total Eligible Pre-Discount One-Time Charges | = \$100.00 | | | | | | | | | | | | | | | | | | |
| One-Time Charges | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total One-Time Charges | \$200.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Ineligible One-Time Charges | - \$100.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Eligible Pre-Discount One-Time Charges | = \$100.00 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>FCC Form 471 Help</p> <p>Show Help</p> <p>BACK </p> | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>⑥ Click on the “BACK” button to return to the Funding Requests Summary table</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | |

go to the next page in this guide

Reviewing the Form

Before certifying the form you will have the opportunity to review the form in its entirety.

Reviewing the Form

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:21 AM EST

[Basic Information](#)[Entity Information](#)[Funding Requests](#)[Certify](#)

This page displays all of the funding requests for this application. From here you can create a new FRN, or edit, delete, or manage the line items of an existing one.

Funding Requests

To create or update specific FRN Line Item(s), please click on the FRN number hyperlink.

| <input type="checkbox"/> FRN | ↓ Nickname | Number of FRN Line Items | FRN Calculation |
|------------------------------|---------------|--------------------------|-----------------|
| 2699000018 | My FY2026 FRN | 1 | \$9,600.00 |

[ADD FRN](#)[EDIT FRN](#)[REMOVE FRN](#)[MANAGE FRN LINE ITEMS](#)

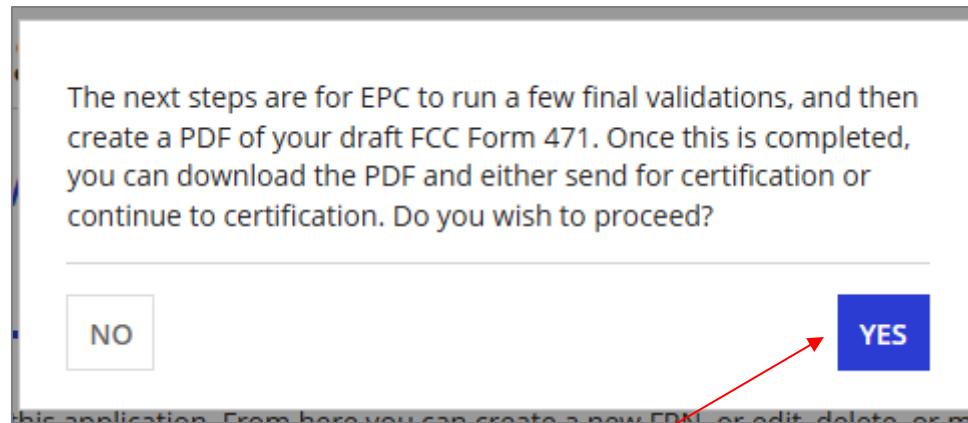
FCC Form 471 Help

[Show Help](#)[BACK](#)[DISCARD FORM](#)[SAVE & SHARE](#)[REVIEW FCC FORM 471](#)

① Click on the “REVIEW FCC FORM 471” button when your FRNs for this form are complete

Reviewing the Form

A warning message will display



② Click on the “YES” button to proceed

Reviewing the Form

A message will display regarding the generation of the PDF

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:18 AM EST

Basic Information Entity Information **Funding Requests** Certify

FCC Form 471 Draft version of the PDF generation is in progress and it may take a few minutes to complete. Please click 'Refresh' once or twice a minute to check if the PDF generation is complete. If you don't want to wait, click 'Resume Task Later' to close the current screen, and EPC will assign you a task to continue PDF review and certification process.

RESUME TASK LATER **REFRESH**

③ Click on the “REFRESH” button to proceed
NOTE: It may take several minutes (and several refreshes)

Reviewing the Form

Once generated, a screen with a link to a draft version of the form will display

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:18 AM EST

Basic Information Entity Information Funding Requests **Certify**

Please download and carefully review this FCC Form 471 before certifying.

Download Document Link
[USAC_FCC_FORM_471_APPLICATION_261000024_DRAFT](#)

By checking this box, I certify that the information in the PDF document above is correct.

FCC Form 471 Help

Show Help

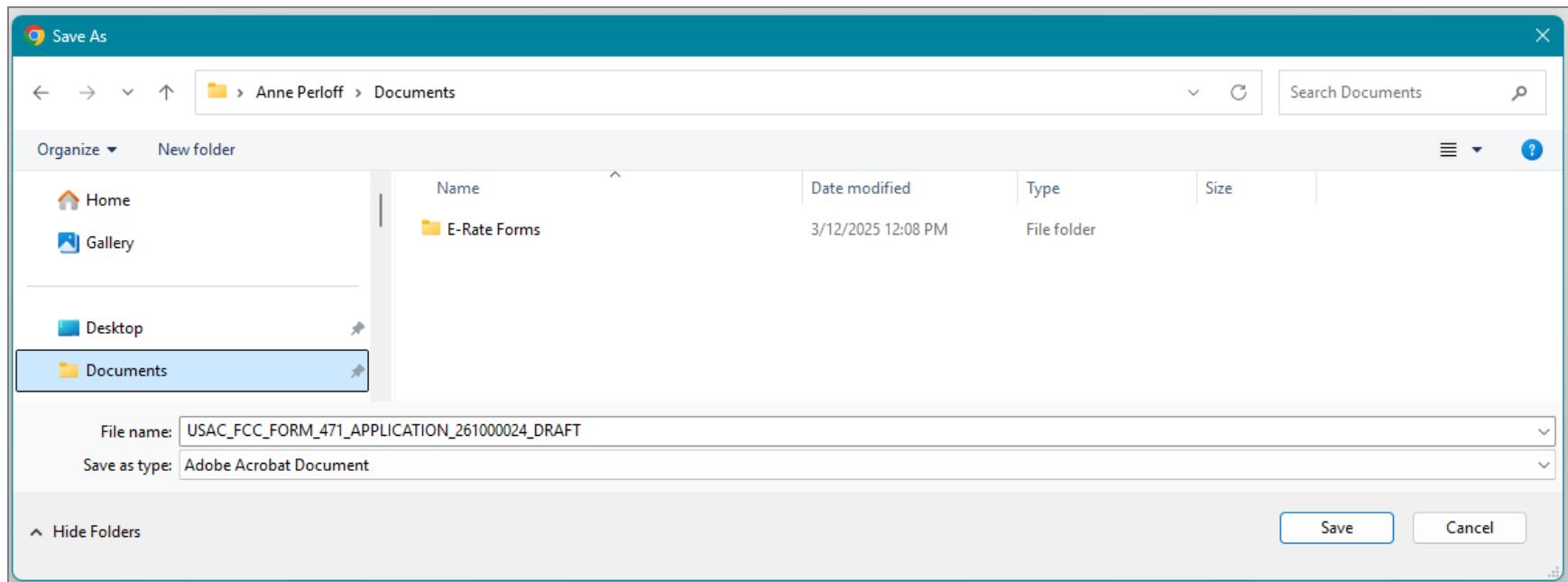
EDIT FORM **SEND FOR CERTIFICATION** **CONTINUE TO CERTIFICATION**



④ To review the application, click on the link for the document to download it to your computer

Reviewing the Form

⑤ Save the PDF to your computer



Reviewing the Form

⑥ Open the PDF to view the form draft and review it thoroughly for accuracy

| | |
|---|---------------------------------------|
| OMB 3060-0806 | Approval by OMB |
| FCC Form 471 | December 2018 |
|  Description of Services Ordered and Certification DRAFT Form 471 | |
| Universal Service Administrative Co. | |
| FCC Form 471 | |
| <u>Application Information</u> | |
| Nickname | My FY2026 Form 471 |
| Funding Year | 2026 |
| <u>Billed Entity</u> | <u>Contact Information</u> |
| School District 6 | School District 6 User 1 |
| 100 Main Street Springfield ME 04487 | 555-555-5555 |
| 555-555-7878 | school.district6.user1@mailinator.com |
| Billed Entity Number | 116 |
| FCC Registration Number | 0027012228 |
| Applicant Type | School District |

Reviewing the Form

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:18 AM EST

Basic Information

Entity Information

Funding Requests

Certify

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By checking this box, I certify that the information in the PDF document above is correct.

FCC Form 471 Help

[Show Help](#)

[EDIT FORM](#)

[SEND FOR CERTIFICATION](#)

[CONTINUE TO CERTIFICATION](#)

⑦ If you identified any missing or inaccurate information within the PDF, back in EPC, click on the “EDIT FORM” button. The form will open at the “Basic Information” screen. Continue through the form screens to make any necessary changes.

Certifying the Form

Finally, a user in your organization will certify and submit the application.

Certifying the Form

Certification of the form takes place in different manners depending on the rights assigned to users for your organization and who in your organization is responsible for certifying the form

- A If you are a partial rights user → *go to the next page in this guide*
- B If you are a full rights user but not the person who will certify the form → *skip to page 136*
- C If you are a full rights user who is responsible for certifying the form → *skip to page 137*
- D If you are a full rights user certifying a form sent to you by another user → *skip to page 142*
- E If you want to send a form to a user for revision → *skip to page 152*
- F If you are a user who was sent a form that needs revision → *skip to page 154*

A If you are a **partial rights user**:

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:21 AM EST

Basic Information

Entity Information

Funding Requests

Certify

Please download and carefully review this FCC Form 471 before certifying.

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By checking this box, I certify that the information in the PDF document above is correct.

FCC Form 471 Help

Show Help

[EDIT FORM](#)

[SEND FOR CERTIFICATION](#)

A ① Click on the “SEND FOR CERTIFICATION” button

A ② You will see a notice that your form will be sent to the full rights users in your organization

A ③ Click on the “YES” button to proceed

A ④ You will be taken to the “Tasks” screen

This function will send your FCC Form 471 to the full rights users in your organization for certification. Do you wish to proceed?

NO

YES

skip to page 157 in this guide

B If you are a **full rights user but not the person who will certify the form:**

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:21 AM EST

Basic Information

Entity Information

Funding Requests

Certify

Please download and carefully review this FCC Form 471 before certifying.

Download Document Link

[USAC_FCC_FORM_471_APPLICATION_261000024_DRAFT](#)

By checking this box, I certify that the information in the PDF document above is correct.

FCC Form 471 Help

Show Help

[EDIT FORM](#)

[SEND FOR CERTIFICATION](#)

[CONTINUE TO CERTIFICATION](#)

B ① Click on the “SEND FOR CERTIFICATION” button

B ② You will see a notice that your form will be sent to the full rights users in your organization

B ③ Click on the “YES” button to proceed

B ④ You will be taken to the “Tasks” screen

This function will send your FCC Form 471 to the full rights users in your organization for certification. Do you wish to proceed?

NO

YES

skip to page 157 in this guide

C If you are a **full rights user who is responsible for certifying the form:**

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:21 AM EST

Basic Information

Entity Information

Funding Requests

Certify

Please download and carefully review this FCC Form 471 before certifying.

[Download Document Link](#)

[USAC_FCC_FORM_471_APPLICATION_261000024_DRAFT](#)

By checking this box, I certify that the information in the PDF document above is correct.

FCC Form 471 Help

[Show Help](#)

[EDIT FORM](#)

[SEND FOR CERTIFICATION](#)

[CONTINUE TO CERTIFICATION](#)

C ① First check the check box to certify that the information is correct

C ② Then click the “CONTINUE TO CERTIFICATION” button to proceed

- ③ You will see the “Certifications” page
- ④ Read the certification text carefully and select the appropriate certifications

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 12:55 PM EST

| Basic Information | Entity Information | Funding Requests | Certify |
|---|--|------------------|---------|
| Please complete the certifications below. | | | |
| Total Funding Summary | | | |
| Below is a summary of the total line item costs on this FCC Form 471: | | | |
| Summary | Type in the amount budgeted for ineligible items (\$0 is the default value) | | |
| Total funding year pre-discount eligible amount on this FCC Form 471 | \$12,000.00 | | |
| Total funding commitment request amount on this FCC Form 471 | \$9,600.00 | | |
| Total applicant non-discount share of the eligible amount | \$2,400.00 | | |
| Total budgeted amount allocated to resources not eligible for E-rate support | \$0.00 | | |
| Total amount necessary for the applicant to pay the non-discount share of eligible and any ineligible amounts | \$2,400.00 | | |
| <p>Are you receiving any of the funds directly from a service provider listed on any of the FCC Forms 471 filed by this Billed Entity for this funding year?</p> <p>Has a service provider listed on any of the FCC Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds needed to pay your non-discounted share?</p> | | | |
| <input type="checkbox"/> Please select a value | | | |
| <input type="checkbox"/> Please select a value | | | |

**CHANGE
THESE TWO
ITEMS TO
“NO” !!!**

Applicant Certifications

- I certify that the entities listed in this application are eligible for support because they are schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. §§ 7801(18) and (38), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million.
- I certify that the entity I represent or the entities listed on this application have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that the entities I represent or the entities listed on this application have secured access to all of the resources to pay the discounted charges for eligible services from funds to which access has been secured in the current funding year. I certify that the Billed Entity will pay the non-discount portion of the cost of the goods and services to the service provider(s).
- I certify an FCC Form 470 was posted and that any related RFP was made available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology goals.
- I certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have complied with them.
- I certify that the services the applicant purchases at discounts provided by 47 U.S.C. § 254 will be used primarily for educational purposes, see 47 C.F.R. § 54.500 and will not be sold, resold or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. § 54.513. Additionally, I certify that the entity or entities listed on this application have not received anything of value or a promise of anything of value, as prohibited by the Commission's rules at 47 C.F.R. § 54.503(d), other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.
- I certify that I and the entity(ies) I represent have complied with all program rules and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments. There are signed contracts or other legally binding agreements covering all of the services listed on this FCC Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.
- I acknowledge 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.
- I certify that I will retain required documents for a period of at least 10 years (or whatever retention period is required by the rules in effect at the time of this certification) after the later of the last day of the applicable funding year or the service delivery deadline for the associated funding request. I acknowledge that I may be audited pursuant to participation in the schools and libraries program. I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the application for, receipt of, and delivery of services receiving schools and libraries discounts, and that if audited, I will make such records available to USAC.
- I certify that I am authorized to order telecommunications and other supported services for the eligible entity(ies) listed on this application. I certify that I am authorized to submit this request on behalf of the eligible entity(ies) listed on this application, that I have examined this request, that all of the information on this form is true and correct to the best of my knowledge, that the entities that are receiving discounts pursuant to this application have complied with the terms, conditions and purposes of the program, that no kickbacks were paid to anyone and that false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001 and civil violations of the False Claims Act.
- I acknowledge that FCC rules provide that persons who have been convicted of criminal violations or held civilly liable for certain acts arising from their participation in the schools and libraries support mechanism are subject to suspension and debarment from the program. I will institute reasonable measures to be informed, and will notify USAC should I be informed or become aware that I or any of the entities listed on this application, or any person associated in any way with my entity and/or the entities listed on this application, is convicted of a criminal violation or held civilly liable for acts arising from their participation in the schools and libraries support mechanism.
- I certify that if any of the Funding Requests on this FCC Form 471 are for discounts for products or services that contain both eligible and ineligible components, that I have allocated the eligible and ineligible components as required by the Commission's rules at 47 C.F.R. § 54.504.
- I certify that the non-discount portion of the costs for eligible services will not be paid by the service provider. The pre-discount costs of eligible services featured on this FCC Form 471 are net of any rebates or discounts offered by the service provider. I acknowledge that, for the purpose of this rule, the provision, by the provider of a supported service, of free services or products unrelated to the supported service or product will be considered a rebate of some or all of the cost of the supported services.

FCC Form 471 Help

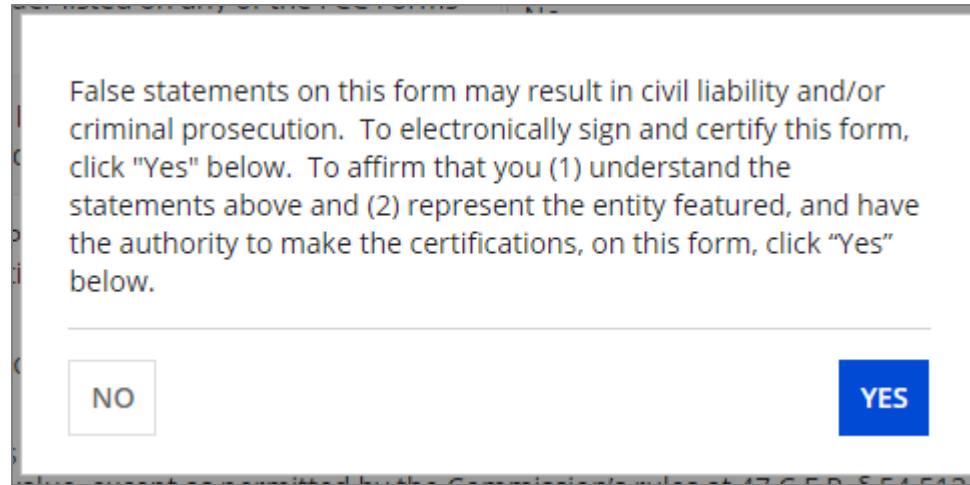
Show Help

**C ⑤ Click the “CERTIFY” button to certify
the form --- this is the equivalent to
providing your electronic signature**

BACK

CERTIFY

C⑥ Read the message regarding the certification and click “YES” if you agree



C ⑦ Once you click “YES” in the confirmation message, the form will be certified. Information about the certifier will then display.

Certification Confirmation

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 1:12 PM EST

Basic Information

Entity Information

Funding Requests

Certify

You have successfully filed FCC Form 471 #261000024 for FY 2026

Certification Date

1/20/2026 1:12 PM EST

Authorized Person

Name School District 6 User 1

Title Administrator

Employer School District 6

Address 100 Main Street
Springfield, ME 04487

Phone 555-555-5555

Email school.district6.user1@mailinator.com

[Please click here to access your certified FCC Form 471 PDF](#)

FCC Form 471 Help

[Show Help](#)

C ⑧ Click on the “CLOSE” button

CLOSE

[Full Rights / Certifying a Form Sent By Another]

D If you are a **full rights user who is certifying a form sent to you** by another user:

D ① Once a user has sent you a Form 471 to certify, you will receive a task in your task list. You may need to click on the “Tasks” link in the blue navigation bar to view/refresh the list of tasks.



D ② Click on the task to continue

[Full Rights / Certifying a Form Sent By Another]

D ③ Click on the “ACCEPT” button to accept the task

You must accept this task before completing it

ACCEPT **GO BACK**

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

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Basic Information Entity Information Funding Requests **Certify**

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EDIT FORM **REASSIGN FOR REVISION** **SEND FOR CERTIFICATION** **CONTINUE TO CERTIFICATION**

[Full Rights / Certifying a Form Sent By Another]

D ④ To review the application, click on the link for the document to download it to your computer

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

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Basic Information Entity Information Funding Requests Certify

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EDIT FORM REASSIGN FOR REVISION SEND FOR CERTIFICATION CONTINUE TO CERTIFICATION

[Full Rights / Certifying a Form Sent By Another]

D ⑤ Open the PDF to view and review the Form 471

| | |
|---|--|
| OMB 3060-0806 FCC Form 471 | Approval by OMB December 2018 |
|  Universal Service Administrative Co. | Description of Services Ordered and Certification DRAFT Form 471 |
| FCC Form 471 | |
| <u>Application Information</u> | |
| Nickname | My FY2026 Form 471 |
| Funding Year | 2026 |
| Application Number | 261000024 |
| Category of Service | Category 1 |
| <u>Billed Entity</u> | |
| School District 6 100 Main Street Springfield ME 04487 555-555-7878 school.district6.user1@mailinator.com | <u>Contact Information</u> School District 6 User 1 555-555-5555 school.district6.user1@mailinator.com |
| Billed Entity Number | 116 |
| FCC Registration Number | 0027012228 |
| Applicant Type | School District |

[Full Rights / Certifying a Form Sent By Another]

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:21 AM EST

Basic Information

Entity Information

Funding Requests

Certify

Please download and carefully review this FCC Form 471 before certifying.

Download Document Link

[USAC_FCC_FORM_471_APPLICATION_261000024_DRAFT](#)

By checking this box, I certify that the information in the PDF document above is correct.

FCC Form 471 Help

Show Help

[EDIT FORM](#)

[REASSIGN FOR REVISION](#)

[SEND FOR CERTIFICATION](#)

[CONTINUE TO CERTIFICATION](#)

D ⑥ If you identified any missing or inaccurate information within the PDF, back in EPC, click on the “EDIT FORM” button. The form will open at the “Basic Information” screen. Continue through the form screens to make any necessary changes.

[Full Rights / Certifying a Form Sent By Another]

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

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[EDIT FORM](#)

[REASSIGN FOR REVISION](#)

[SEND FOR CERTIFICATION](#)

[CONTINUE TO CERTIFICATION](#)

D ⑦ If you are the certifier and the form is acceptable, check the check box to certify that the information is correct

D ⑧ Then choose the “CONTINUE TO CERTIFICATION” button to certify the form

[Full Rights / Certifying a Form Sent By Another]

- D ⑨ You will see the “Certifications” page
- D ⑩ Read the certification text carefully and select the appropriate certifications

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 12:55 PM EST

| Basic Information | Entity Information | Funding Requests | Certify |
|---|--|------------------|---------|
| Please complete the certifications below. | | | |
| Total Funding Summary | | | |
| Below is a summary of the total line item costs on this FCC Form 471: | | | |
| Summary | Type in the amount budgeted for ineligible items (\$0 is the default value) | | |
| Total funding year pre-discount eligible amount on this FCC Form 471 | \$12,000.00 | | |
| Total funding commitment request amount on this FCC Form 471 | \$9,600.00 | | |
| Total applicant non-discount share of the eligible amount | \$2,400.00 | | |
| Total budgeted amount allocated to resources not eligible for E-rate support | \$0.00 | | |
| Total amount necessary for the applicant to pay the non-discount share of eligible and any ineligible amounts | \$2,400.00 | | |
| <p>Are you receiving any of the funds directly from a service provider listed on any of the FCC Forms 471 filed by this Billed Entity for this funding year?</p> <p>Has a service provider listed on any of the FCC Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds needed to pay your non-discounted share?</p> | | | |
| <p>Please select a value</p> <p>Please select a value</p> | | | |

**CHANGE
THESE TWO
ITEMS TO
“NO” !!!**

[Full Rights / Certifying a Form Sent By Another]

Check
all of
these
boxes

Applicant Certifications

- I certify that the entities listed in this application are eligible for support because they are schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. §§ 7801(18) and (38), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million.
- I certify that the entity I represent or the entities listed on this application have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that the entities I represent or the entities listed on this application have secured access to all of the resources to pay the discounted charges for eligible services from funds to which access has been secured in the current funding year. I certify that the Billed Entity will pay the non-discount portion of the cost of the goods and services to the service provider(s).
- I certify an FCC Form 470 was posted and that any related RFP was made available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology goals.
- I certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have complied with them.
- I certify that the services the applicant purchases at discounts provided by 47 U.S.C. § 254 will be used primarily for educational purposes, see 47 C.F.R. § 54.500 and will not be sold, resold or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. § 54.513. Additionally, I certify that the entity or entities listed on this application have not received anything of value or a promise of anything of value, as prohibited by the Commission's rules at 47 C.F.R. § 54.503(d), other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.
- I certify that I and the entity(ies) I represent have complied with all program rules and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments. There are signed contracts or other legally binding agreements covering all of the services listed on this FCC Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.
- I acknowledge 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.
- I certify that I will retain required documents for a period of at least 10 years (or whatever retention period is required by the rules in effect at the time of this certification) after the later of the last day of the applicable funding year or the service delivery deadline for the associated funding request. I acknowledge that I may be audited pursuant to participation in the schools and libraries program. I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the application for, receipt of, and delivery of services receiving schools and libraries discounts, and that if audited, I will make such records available to USAC.
- I certify that I am authorized to order telecommunications and other supported services for the eligible entity(ies) listed on this application. I certify that I am authorized to submit this request on behalf of the eligible entity(ies) listed on this application, that I have examined this request, that all of the information on this form is true and correct to the best of my knowledge, that the entities that are receiving discounts pursuant to this application have complied with the terms, conditions and purposes of the program, that no kickbacks were paid to anyone and that false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001 and civil violations of the False Claims Act.
- I acknowledge that FCC rules provide that persons who have been convicted of criminal violations or held civilly liable for certain acts arising from their participation in the schools and libraries support mechanism are subject to suspension and debarment from the program. I will institute reasonable measures to be informed, and will notify USAC should I be informed or become aware that I or any of the entities listed on this application, or any person associated in any way with my entity and/or the entities listed on this application, is convicted of a criminal violation or held civilly liable for acts arising from their participation in the schools and libraries support mechanism.
- I certify that if any of the Funding Requests on this FCC Form 471 are for discounts for products or services that contain both eligible and ineligible components, that I have allocated the eligible and ineligible components as required by the Commission's rules at 47 C.F.R. § 54.504.
- I certify that the non-discount portion of the costs for eligible services will not be paid by the service provider. The pre-discount costs of eligible services featured on this FCC Form 471 are net of any rebates or discounts offered by the service provider. I acknowledge that, for the purpose of this rule, the provision, by the provider of a supported service, of free services or products unrelated to the supported service or product will be considered a rebate of some or all of the cost of the supported services.

FCC Form 471 Help

Show Help

D 11

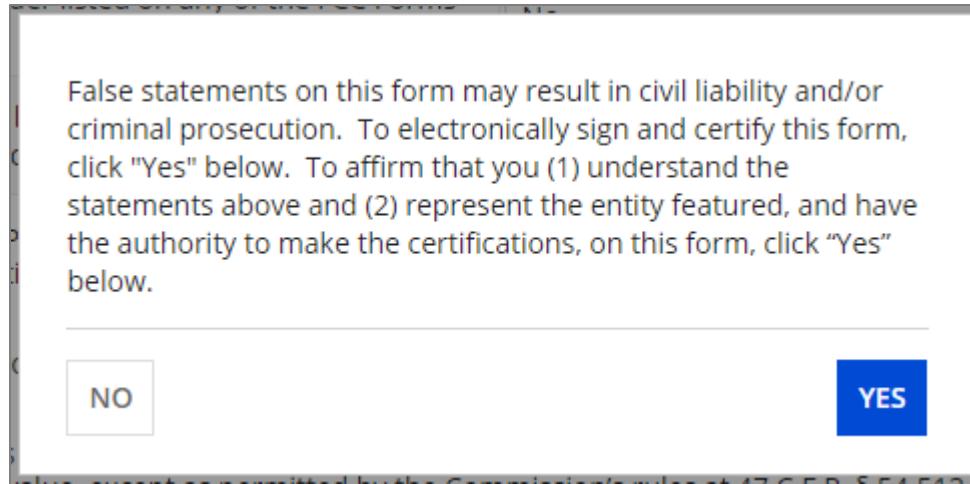
Click the “CERTIFY” button to certify
the form --- this is the equivalent to
providing your electronic signature

BACK

CERTIFY

[Full Rights / Certifying a Form Sent By Another]

D ⑫ Read the message regarding the certification and click “YES” if you agree



[Full Rights / Certifying a Form Sent By Another]

D ⑬ Once you click “YES” in the confirmation message, the form will be certified. Information about the certifier will then display.

Certification Confirmation

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 1:12 PM EST

Basic Information

Entity Information

Funding Requests

Certify

You have successfully filed FCC Form 471 #261000024 for FY 2026

Certification Date

1/20/2026 1:12 PM EST

Authorized Person

Name School District 6 User 1

Title Administrator

Employer School District 6

Address 100 Main Street
Springfield, ME 04487

Phone 555-555-5555

Email school.district6.user1@mailinator.com

[Please click here to access your certified FCC Form 471 PDF](#)

FCC Form 471 Help

[Show Help](#)

D ⑭ Click on the “CLOSE” button

CLOSE

[Sending a Form For Revision]

E If you want to send a form to a user for revision:

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:21 AM EST

Basic Information

Entity Information

Funding Requests

Certify

Please download and carefully review this FCC Form 471 before certifying.

Download Document Link

[USAC_FCC_FORM_471_APPLICATION_261000024_DRAFT](#)

By checking this box, I certify that the information in the PDF document above is correct.

FCC Form 471 Help

Show Help

[EDIT FORM](#)

[REASSIGN FOR REVISION](#)

[SEND FOR CERTIFICATION](#)

[CONTINUE TO CERTIFICATION](#)

E ① Select the “REASSIGN FOR REVISION” button to
reassign the form to another user to make changes

[Sending a Form For Revision]

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:21 AM EST

Please select an assignment for this revision.

Original Form Owner

School District 6 User 1

Assignee(s) for Revision *

- All users with partial rights to this form
- All users with full rights to this form
- All users with partial rights or full rights to this form
- Select an individual recipient

Instructions for Revision

To: ...

Please describe the revisions that are required for this FCC Form 471.

E ② Choose the type of user or an individual to assign the form to for revision, provide any instructions such as the items to revise, and then click on the “REASSIGN FOR REVISION” button

FCC Form 471 Help

[Show Help](#)

[BACK](#)

[REASSIGN FOR REVISION](#)

[User Sent a Form for Revising]

F If you are a user who was sent a form that needs revision:

F ① You will receive a task indicating a form needs revision



F ② Click on the task to continue

F ③ Click on the “ACCEPT” button to accept the task

You must accept this task before completing it

[!\[\]\(5b9edaeab98f77ce987653113489bf66_img.jpg\) ACCEPT](#) [!\[\]\(10e5b64faae42ce902e910780122acac_img.jpg\) GO BACK](#)

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:21 AM EST

Please carefully review the required revisions for the FCC Form 471 below.

Instructions for Revision

From: School District 6 User 1

update MRC for line 1

FCC Form 471 Help

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[CONTINUE TO FORM](#)

FCC Form 471 - Funding Year 2026

School District 6 (BEN: 116) - My FY2026 Form 471 - Form # 261000024

Last Saved: 1/20/2026 8:21 AM EST

Please carefully review the required revisions for the FCC Form 471 below.

Instructions for Revision

From: School District 6 User 1

update MRC for line 1

FCC Form 471 Help

Show Help

CONTINUE TO FORM

④ Read the instructions and click on the “CONTINUE TO FORM” button to make the necessary changes to the form

⑤ Complete the appropriate steps to either certify the form yourself or send it back to another user to be certified

Revisiting Forms

Revisiting Forms

From the Landing Page, you can revisit both incomplete and certified forms

- ① Scroll to the “FCC Forms and Post-Commitment Requests” section of the Landing Page

▼ FCC Forms and Post-Commitment Requests

FCC Forms Post-Commitment Requests

Form Type FCC Form 470 

Funding Year -- Select a Funding Year -- 

Status All Incomplete Certified Canceled

| Nickname | Application Number |
|----------|--------------------|
| | |
| | |
| | No items available |



- ② First change the “Form Type” menu to display “FCC Form 471” and then select the Funding Year

Revisiting Forms

Use the “Status” options to change whether all forms, just incomplete forms, just certified forms, or just committed forms are listed

▼ FCC Forms and Post-Commitment Requests

FCC Forms
 Post-Commitment Requests

Form Type: FCC Form 471

Funding Year: 2026

Status: All
 Incomplete
 Certified
 Committed

| Application Number | Nickname | Funding Year | Status | Certified Date |
|--------------------|-----------------------|--------------|------------|-----------------------|
| 261000003 | My FY2026 C1 Form 471 | 2026 | Incomplete | |
| 261000004 | My FY2026 C2 Form 471 | 2026 | Incomplete | |
| 261000024 | My FY2026 Form 471 | 2026 | Certified | 1/20/2026 1:12 PM EST |

③ Click on a form number to display it

Revisiting Forms

The form's summary information screen displays

- Use the links along the top to view the various sections of the form and other tasks/information related to it
- To edit an incomplete form, go to the “Tasks” page

News Tasks (36) **Records** Reports Actions

SU appian

Records / FCC Forms 471

My FY2026 Form 471 - #261000024

Summary Funding Requests Review Inquiries Deferral History Discount Calculation Entity Information News Related Actions

Incomplete Certified **In Review** Outreach Wave Ready Committed

Review Status Awaiting Initial Review

> FCC Notice Required By The Paperwork Reduction Act (OMB Control Number: 3060-0806)

Application Information

| | |
|---------------------------------------|--|
| Nickname My FY2026 Form 471 | Created Date 1/20/2026 8:08 AM EST |
| Application Number 261000024 | Created By School District 6 User 1 |
| Funding Year 2026 | Certified Date 1/20/2026 1:12 PM EST |
| Window Status In-Window | Certified By School District 6 User 1 |
| Category of Service Category 1 | Last Modified Date 1/20/2026 1:12 PM EST |
| | Last Modified By School District 6 User 1 |

Revisiting Forms

My FY2026 Form 471 - #261000024

Summary

Funding Requests

Review Inquiries

Deferral History

Discount Calculation

Entity Information

News

Related Actions



Incomplete

Certified

In Review

Outreach

Wave Ready

Committed

Review Status Awaiting Initial Review

> FCC Notice Required By The Paperwork Reduction Act (OMB Control Number: 3060-0806)

Application Information

Nickname My FY2026 Form 471

Created Date 1/20/2026 8:08 AM EST

Application Number 261000024

Created By School District 6 User 1

Funding Year 2026

Certified Date 1/20/2026 1:12 PM EST

Window Status In-Window

Certified By School District 6 User 1

Category of Service Category 1

Last Modified Date 1/20/2026 1:12 PM EST

Last Modified By School District 6 User 1

Billed Entity Information

School District 6

Billed Entity Number: 116

100 Main Street

FCC Registration Number: 0027012228

Springfield, ME 04487

Applicant Type: School District

555-555-7878

school.district6.user1@mailinator.com

Consultant Information

Consulting Firms

The consulting firms associated with your organization are listed below.

| Name | Consultant Registration Number | Phone Number | Email |
|------------------------|--------------------------------|--------------|-------|
| USAC Consulting Firm 1 | 15010001 | 111-111-1111 | |

>Contact Information

Name School District 6 User 1

Phone Number 555-555-5555

Email school.district6.user1@mailinator.com

Holiday / Summer Contact Information

There is no Holiday / Summer Contact Information for this FCC Form 471.

FCC Form 471 Generated Documents

| FCC Form 471 Version | Description |
|----------------------|---|
| Original Version | This document contains information that was submitted to USAC upon certification of the FCC Form 471. |

Note the breadcrumb trail indicating the current status of the form (In Review, Outreach, Wave Ready, or Committed)

Completed, certified forms have a link you can use to download a copy of the form

Next Steps

What happens after I submit the form?

Check the News feed for updates related to the form.

 **E-rate Productivity Center**
12 minutes ago · 

This Receipt Acknowledgement Letter (RAL) is an acknowledgement that USAC has received School District 6's FCC Form 471 - 261000024 for Funding Year 2026 on 1/20/2026. Each service provider featured on this form will also be notified of the information submitted for the service provider.

It is important that you review this form now to make sure the products and services you have listed on your FCC Form 471 are correct and complete, and if necessary, take the appropriate corrective action as soon as possible. You are allowed to correct certain errors on your form, but not others. For fields that allow a correction, you will be able to edit the information in the form field directly. To determine what corrections are allowed and why, see the "List of Correctable Ministerial and Clerical Errors" on our website.

NEXT STEPS

- Gather the documentation you used to complete your form and the entries in your profile (e.g., NSLP numbers, list of entities receiving services, Category Two ...[More](#)



MY FY2026 FORM 471 - #261000024 #116 - SCHOOL DISTRICT 6

*The Receipt Acknowledgment Letter
will be included in your News feed*

What happens after I submit the form?

Program Integrity Assurance (PIA) will review your application after it is submitted and communicate with you through EPC.

Summary Funding Requests **Review Inquiries** Discount Calculation Entity Information News Related Actions

Pending Inquiries

| Read | Notice | Name | Outreach Type | Assigned By | Title | Phone # | Assigned Date | Due Date | Extn. | Status |
|------|--------|--------------------------------------|----------------|---------------|---------------------------|--------------|------------------------|------------|-------|-----------------|
| | | Other Issues | Regular 15-Day | Diana Zarillo | Case Management Associate | 973-581-5088 | 10/16/2017 3:25 PM EDT | 10/31/2017 | 0 | Response Needed |
| | | Eligibility of Products and Services | Regular 15-Day | Arvind Patel | Manager, Case Management | 973-581-6700 | 9/11/2017 3:42 PM EDT | 10/3/2017 | 1 | Response Needed |

What happens during review?

- Reviewers verify the eligibility of the schools and libraries and their discount levels.
- Reviewers verify that the services requested are eligible for E-Rate discounts.
- You are given an opportunity to make allowable corrections to your form.
- Reviewers communicate with you with requests for additional documentation.
- Reviewers may ask for additional verification of your compliance with program rules.

What do I do during a PIA Review?

- Have documentation ready
- Respond to inquiries and provide information promptly, by the deadline (usually 15 days)
- Ask for clarification if you are unsure what is needed
- Ask early for an extension if you need it
- Put responses in writing
- Document all responses

What happens after the review?

After the review is completed, USAC makes a funding decision on your application and issues a Funding Commitment Decision Letter (FCDL) in EPC and via email.

What is the FCDL?

The Funding Commitment Decision Letter (FCDL) is a letter issued by USAC to both the applicant and the service provider that contains decisions on their funding requests. The letter states which funding requests of the Form 471 are approved or denied.

Applicants and service providers should carefully review their FCDL for details on approved or denied requests and any adjustments made to the original requests, as well as next steps (such as the deadline for filing an appeal).

What do I save for my files?

★ Save all records for at least 10 years from the last date of service ★

- Copies of mechanisms used to gather NSLP data
- A copy of the completed Form 471
- Copies of spreadsheets or any other mechanisms used to calculate costs
- FCC Form 471 Receipt Acknowledgement Letter
- A copy of all correspondence with reviewers
- A copy of all documentation submitted during PIA review
- Funding Commitment Decision Letter