



# Spring ISD Education Foundation 2016-17 Grant Application

## COVER PAGE PART 1

Check all applicable content area(s)

- English/Language Arts
- Mathematics
- Bilingual/ESL/LOTE
- Performing & Visual Arts
- Science
- Social Studies
- Athletics/PE
- Instructional Technology
- Career & Technology Education
- Health/Wellness
- Special Education

Type of grant: \_\_\_ Teacher \_\_\_ Campus \_\_\_ Multi-Campus

Project Title: \_\_\_\_\_

Amount Requested for Grant: \$ \_\_\_\_\_

**FOR OFFICE USE ONLY**

Grant Number: \_\_\_\_\_

Date Received: \_\_\_\_\_

\_\_\_ This application is for a new project (Creative & Innovative proposals receive priority)

\_\_\_ This application is for a project that replicates a previously funded project

Name(s) and signature(s) of all applicants associated with this grant application. The individual on the first line will be the primary point of contact for all communication purposes.

**(Print Name)**

**(Signature)**

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\_\_\_\_\_

School(s): \_\_\_\_\_

Grade(s): \_\_\_\_\_

Subject(s): \_\_\_\_\_

Estimated number of participants:

\_\_\_\_\_ students (target group: \_\_\_\_\_)

\_\_\_\_\_ teachers

\_\_\_\_\_ parents

Implementation dates: \_\_\_\_\_

Signature of Principal: \_\_\_\_\_

Date: \_\_\_\_\_

**Abstract (2 or 3 sentence summary without rationale)**

Empty box for abstract summary.

On typed, 8 1/2 x 11 pages, complete the following information. Type each heading and section in the order it is in below. Failure to complete any section of the application will result in points being deducted. Complete the cover page with all necessary signatures and complete the checklist of content area(s). Itemize the budget on the last page (including shipping). Principals must complete and sign the Education Foundation Grant Review Form for principals.

## **PART 2**

**PURPOSE:** What will happen as a result of this project? What is the goal of the project? The purpose should be stated specifically, clearly and briefly.

## **PART 3**

**RATIONALE:**

A. Explain specifically how you know there is a need for this project -- use research data, educational results, test scores, discrepancies in ability and performance, to make a case for why this project is needed for the specific students you will serve. Data must be related to the people to be involved. If it works, how will things be better?

B. If this proposal replicates a previously funded project at your school or a different school, please explain success of that project and also give clear details how this new proposal will amend, enhance or enrich the previously funded grant.

## **PART 4**

**OBJECTIVES:** List the outcomes the project should produce in a measurable way, i.e., 75% of students involved in the project will ... ; 50% of students participating will ... ; every child involved will ... ; reading test scores of students involved will increase by ... ; at least 15 parents will read 15 minutes per day with their child. These are the criteria for accomplishment of the project - how you will know whether you did what you said you would do.

## **PART 5**

**DESCRIPTION:** Be sure to answer each of the following questions in the description.

Who will conduct the project? Who will be included in the project? Include grade level/age(s)/subject area/parents, etc. How many students will participate? How will students be selected to participate? What is the timeline/schedule of the project? Is there a daily schedule/weekly schedule? When and where will the project take place? Describe in detail the activities to be conducted. What materials will be used in the project or activities? What school, staff, volunteer, parent or partnership resources are available to help support the project?

## **PART 6**

**EVALUATION PROCEDURES:** Refer to each objective listed in PART 4 and specify how each will be measured to determine if the objective was met totally, partially or not at all. Indicate what instruments, if any, will be used, comparisons, pre and post-tests, that are appropriate for the objective.



**SPRING ISD EDUCATION FOUNDATION  
GRANT REVIEW FORM FOR PRINCIPALS**

Dear Principal,

Please read the grant application being submitted to the Spring ISD Education Foundation by teachers on your staff and complete a separate review form for each application. Your comments are an important tool used in evaluating the worth of this proposal.

GRANT NAME \_\_\_\_\_

CAMPUS \_\_\_\_\_

1. Do you consider this project to be *creative and innovative* for your campus? Yes  No

a. Please explain why: \_\_\_\_\_  
\_\_\_\_\_

2. Are you aware of similar projects being conducted on your campus? Yes  No

a. Or at other locations? Yes  No

b. Please describe: \_\_\_\_\_  
\_\_\_\_\_

c. If yes, then how does this grant differ? \_\_\_\_\_  
\_\_\_\_\_

3. Is this project feasible as described in the written application? Yes  No

If not, explain \_\_\_\_\_  
\_\_\_\_\_

4. Are you aware of other resources of funding available for this project? Yes  No

If so, what are they? \_\_\_\_\_

5. Are any of the materials requested already available on your campus? Yes  No

If so, please list: \_\_\_\_\_

6. Recommendations for strengthening the proposal: \_\_\_\_\_  
\_\_\_\_\_

7. I have discussed the above recommendations with the grant applicant. Yes  No

8. Comments: \_\_\_\_\_  
\_\_\_\_\_

I RECOMMEND THE FUNDING OF THIS GRANT:

\_\_\_\_\_  
*Signature of Principal*