

Grant Application Form

**PART A - OVERVIEW**

1. Please check type of grant: Teacher/Staff ⬜ Supervisor ⬜ Principal ⬜ District ⬜

2. I have reviewed the CEF Funding Guidelines and Grant Procedures. ⬜

3. Project Title:

4. Amount Requested:

5. Date Submitted:

6. Name of Primary Applicant:

Primary Applicant Email address:

Primary Applicant School and Staff Title/Position:

Co-Applicant Name (if applicable):

Co-Applicant Email address:

Co-Applicant School and Staff Title/Position:

Co-Applicant Name (if applicable):

Co-Applicant Email address:

Co-Applicant School and Staff Title/Position:

7. Brief Overview of Project:

8. Grade Level(s) of Targeted Students:

Number of Students who will be Involved in Project:

Curriculum Area(s):

9. Estimated Date Project will Begin:

**PART B – PROJECT DETAILS**

1. Project Description: Please describe the project, including the overall objective of the project, activities that will take place, who will benefit from the project, and expected outcomes. Add any other information that will help CEF understand the project.

2. Need/Rationale: Please describe the educational need for this project based on evidence within the school or published literature. What areas of the curriculum will it enrich or enhance? How is the proposed project related to the current (or anticipated) curriculum in the district?

3. Sustainability: Will this project be able to be used by other colleagues? Will it be used past the completion date of this school year?

4. Evaluation: Please detail how you will evaluate the project to determine if the objectives of the project have been met. How will you share the results of the project with other colleagues in other relevant classrooms within the district? If appropriate, discuss how this project can be reproduced in other classrooms/schools.

**PART C - BUDGET**

1. Expenses: Present a detailed list of expenses. Use the attached worksheet to show items that will be purchased. Attach website addresses or catalogue pages of items if applicable. For Classroom of the Furniture Grants, please indicate items by classroom or grade. (Please note: Funding cannot be increased after the grant is awarded).

2. Income: Indicate if funds are being allocated (or sought) for this project from other sources, such as PTO donations or other grant programs.

**PART D - UNDERSTANDING**

* I understand that all grant funds must be expended on the approved project within the school year for which it was awarded. If the project is canceled or materially changed, the funds must be returned to CEF.
* I understand that any changes in scope of project or expenditure of grant funds must be approved by the CEF Board of Trustees in writing and in advance.
* I understand that all materials, equipment and supplies purchased with CEF grant funds become the property of the School District of the Chathams and should be stored at the school where the project takes place.
* I understand that if I am to leave the school from which the grant is issued, any and all material associated with such will remain at said school.
* I understand that CEF has the right to publicize and share the grant project in media outlets and/or other educators within the district.
* I understand that I am required to submit a Year-End Grant Report that will describe the grant project outcomes, show expenditure of funds and include photos that showcase the grant in action by the date stated in the grant acceptance letter.

**Required Signatures**

Application will be reviewed by CEF only upon receiving Grant Application complete with applicable signatures. Please email a scanned copy of completed application, with Signatures, to the Grant Chair at sallymallen115@gmail.com.

⬜

Applicant/Date

⬜

Co-Applicant/Date

⬜

Co-Applicant/Date

⬜

School Principal/Date

⬜

Curriculum Supervisor/Date

⬜

Director of Technology/Date (if applicable)

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| **BUDGET** | | | | |
|  |  |  |  |  |
| **Quantity** | **Description of Items** | **Cost** | **S&H** | **Vendor** |
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| **TOTAL (with S&H costs):** | |  |  |  |