GAF: Grant Approval Form FOR GRANT APPLICATIONS \$2,000 OR MORE

Date of Board Meeting: 2-19-08	Office Use Only						
	Section 1: General Inf		1gendu Item No. Continuation				
inew Grant	section 1. General ini	ormation.	Continuation				
Grant Start/End Dates: Oct. 2007 - May 20	08 Application Deadl	ine:	Grant Amt: 2500				
Funder's Grant Title: Your Grant Title: Peveloping Reading Speaking and e.g. Weller Teacher Mini-Grant, Building Blocks for Success, etc. e.g. Up. Up and Away, Exploring Out Heritage, Value Guillett, etc. 18							
Grant Writer: Jen Nzeza School/Dept. Sooker / 64P Phone 359 5884 Ext 60954							
Grant Contact Person* Jen Nzeza School/Dept Booker Phone Same Ext							
*This is the school/district-based person who is in charge of the g		# C + 1 + 2 + 1 + 1	H 6				
Schools/Programs to be served by this grant	# of staff impacted	# of students impacted	# of parents impacted				
AP Team		40 to start					
Does this grant require matching funds?these funds be raised?	Yes No If yes,	what amount?	How will				
Grant Description							
Please fill in all blanks. Do not re	fer to attachments in yo	ur summaries. Do	not attach separate sheets.				
Briefly summarize the overall purpose/objective of the grant and indicate how this grant will contribute to the needs and goals of your School Improvement Plan and/or District Plan. (Not grant activities)							
The Purpose is to enhance the reading, writing, speaking							
Skills in a fun and creative way through podcasting The							
grant contributes to our SIEGOals of increasing writing and reading.							
Briefly list grant program activities (what is going to be done with the grant funds):							
Program activities include learning podcasting software;							
and reporting, and recording an original podcast.							
and reporting all original poacest.							
Please provide a brief explanation of pertinent budget items that will be funded through this grant. (Please indicate if funds will be used for new/old staff position, contracted services, travel, materials/supplies, equipment/furniture, facilities, and other applicable items.)							
e-Podcast Producer software programs (3); I professional							
recorders; 2 Pro headsets.							
How will grant activities be continued after the end of grant period?							
I will be able to continue using this equipment							
In subsequent yang							
De Bazenas	Signature of Cost Center	Hand	Date				
Send this completed form and 1 copy of your grant to the Grants Office, Research, Assessment, and Evaluation-Landings PAGE 1 of 2 Rev. 11/01/07							

Please Type or Print in Inl	GAF: Gr	ant Approval Form		100 10 20	
	Section Two: Sun	nmary for grants ov	er \$2,000.		
(These grants re	quire School Board approval and r	nust be placed on the Schoo	l Board Agenda by Grants Office	staff.)	
			e/Discretionary		
Name of Primary Fund Source	Funder's Contact Name	Funder's Addres	S Phone Number	\$ Amount	
Jordan Fundamentals Innovation Gran	Jordan Fundamental Compass Consu	jf@ compass- consult.o	1-800-673- 5723	42500	
—	NOTE: If MAJOR TE (does not include	CCHNOLOGY is part e cameras, DVD playe			
that no additional	nology support personnel mu wiring or electrical work, b ect. Please have your technology	eyond what is provided	I through the grant, will be	needed to	
	Te	echnology Support Sta	ff		
Please call Jody He can be reached	Dumas to discuss your product at 361-6311 ext. 68824. If a cluded with your GAF. Thank you. Please care	ject and receive appr	oval to go forward with you ed to create a memo for his	our proposal.	
		OFFICE USE ONI			
		n Three: Signatures			
	F TECHNOLOGY INFORMAT ERVICES	ion *Dir	*DIRECTOR OF FACILITIES SERVICES		
RESEARCH ASSESSM	ENT & EVALUATION (RAE		DIRECTOR OF BUDGET		
RESEARCH, ASSESSME	BAT & EVALUATION (RAE	,	DIRECTOR OF DEDOLE		
	OF ELEMENTARY, MIDDLE CONDARY	, OR A	ASSOCIATE SUPERINTENDENT		
	St	PERINTENDENT			
	*Signatures	needed only if application	able.		
Send this completed form	n and I copy of your grant to	the Grants Office, Rese	earch, Assessment, and Eval	uation-Landings	

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