

FOR GRANT APPLICATIONS \$2,000 OR MORE

Office Use Only

Date of Board Meeting:

Agenda Item No.

New Grant

Section 1: General Information:

Continuation

Grant Start/End Dates: 11/01/08 to 06/30/08 Application Deadline: _____ Grant Amt: \$5,000

Funder's Grant Title: _____ Your Grant Title: Woodwinds at Booker Middle School
 e.g. Weller Teacher Mini-Grant, Building Blocks for Success, etc. e.g. Up, Up and Away, Exploring Our Heritage, Young Galileos, etc

Grant Writer: _____ School/Dept. _____ Phone _____ Ext _____

Grant Contact Person* Cindy Balistreri School/Dept Curriculum Phone 927-9000 Ext 34100

*This is the school/district-based person who is in charge of the grant.

Schools/Programs to be served by this grant	# of staff impacted	# of students impacted	# of parents impacted
Booker Middle School	N/A	100	N/A

Does this grant require matching funds? Yes No If yes, what amount? _____ How will these funds be raised? _____

Grant Description

Please fill in all blanks. Do not refer to attachments in your 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)

This grant addresses the NeXt Generation pillars of Resources, People and Quality by providing extra music instruction at Booker Middle School, provided by a highly qualified music specialist.

Briefly list grant program activities (what is going to be done with the grant funds):

Dr. Jane Hoffman, a music specialist for woodwinds, will visit Booker Middle School to provide individual and small group instruction to students on flute, clarinet, and saxophone. Dr. Hoffman is a certified teacher and currently is a substitute teacher for the Sarasota County School District.

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.)

The grant funds will be used for Dr. Hoffman's contracted services.

How will grant activities be continued after the end of grant period?
 If the grant is not continued in the future, the program will end.

Nancy Roberts
 Print Name of Cost Center Head

Nancy Roberts
 Signature of Cost Center Head

12/5/08
 Date

Send this completed form and 1 copy of your grant to the Grants Office, Research, Assessment, and Evaluation-Landings

Please Type or Print in Ink

GAF: Grant Approval Form

Section Two: Summary for grants over \$2,000.

(These grants require School Board approval and must be placed on the School Board Agenda by Grants Office staff.)

Fiscal Management will be done by:

- District Finance Office
- School Internal Account
- Other (name):

- Entitlement/Flowthrough
- Competitive/Discretionary
- Continuation
- Other: _____

Fund Source:

- Federal (indirect cost \$) _____
- State
- Local Foundation
- Other:

Name of Primary Fund Source	Funder's Contact Name	Funder's Address	Phone Number	\$ Amount
The Vera and Imre Hecht Foundation, Inc.	Veronica Simon, Treasurer	1819 Main Street, Suite 610 Sarasota, FL 34236	Fax: 941-954-2128	\$5,000



NOTE: If MAJOR TECHNOLOGY is part of this grant:
(does not include cameras, DVD players, etc.)

Your school technology support personnel must review the physical capabilities of the area involved and agree that no additional wiring or electrical work, beyond what is provided through the grant, will be needed to complete the project. Please have your technology support staff member sign off on your project here.

Technology Support Staff



NOTE: If your project involves CONSTRUCTION or requires RETROFITTING space:

Please call Jody Dumas to discuss your project and receive approval to go forward with your proposal. He can be reached at 361-6311 ext. 68824. If approved, you will need to create a memo for his approval and signature, to be included with your GAF.

Thank you. Please call ext 927-9000 ext. 32172 with questions.

GRANTS OFFICE USE ONLY

Section Three: Signatures

Grants Office personnel will obtain applicable signatures in this section

Non file

*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION SERVICES

Nonfile

Non file - construction

*DIRECTOR OF FACILITIES SERVICES

Merisa Catalano

RESEARCH, ASSESSMENT & EVALUATION (RAE)

Non file

DIRECTOR OF BUDGET

Non file

*EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE, OR SECONDARY

ASSOCIATE SUPERINTENDENT

Lori M. White

SUPERINTENDENT

*Signatures needed only if applicable.

Send this completed form and 1 copy of your grant to the Grants Office, Research, Assessment, and Evaluation-Landings