

Please Type or Print in Ink

GAF: Grant Approval Form

RAE# _____

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: 9/09 to 6/10 Application Deadline: 6/1/09 Grant Amt: \$5000 + prizes

Funder's Grant Title: PTO Today Parent Group of the Year Your Grant Title: Sammy's Run

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: Mary Lisa Millbourn School/Dept. Oak Park School Phone 361-6428 Ext 56065

Grant Contact Person* Mary Lisa Millbourn School/Dept Oak Park School Phone 361-6428 Ext 56065

*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
Oak Park School	150	385	200

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 is an award for previously completed work on Sammy's Run. Sammy's Run was a race which increased disability awareness and raised funds for our school. We have submitted Sammy's Run in the "Outstanding Job on a Completed Project" category. The objective of applying for this award was to continue increasing disability awareness and to get additional funds for our school to supply needed therapy and education supplies

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

Our students require specialized equipment that can be costly. Grant funds will be used to purchase switches and adaptive equipment needed to work with students with disabilities. It will fund conference registration for several teachers to attend an assistive technology conference to learn about advances in this area and share that information with school personnel. One item in the award is a Direct TV system to be used as a donation that can be used to gather additional funds for the next school year.

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.)

1. Switches
2. adaptive equipment (walkers, standers, etc)
3. conference registration
4. picture support supplies (pictures, lamination supplies, books, etc)

How will grant activities be continued after the end of grant period?

Materials, equipment and information gained will be available at the school long after the grant year has ended and will support our students.

Daniel Parrott
Print Name of Cost Center Head

[Signature]
Signature of Cost Center Head

6/30/09
Date

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

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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): Oak Park PTSO

- 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
PTO Today	Patty Catalano	Parent Group of the Year Search PTO Today 100 Stonewall Blvd, Suite 3 Wrentham, MA 02093	No phone available. Contact info: pattyc@ptotoday.com	\$5000 + Direct TV system to be used as raffle



**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

*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION SERVICES

✓ on file _____ *✓ on file Construction*
*DIRECTOR OF FACILITIES SERVICES

[Signature]
RESEARCH, ASSESSMENT & EVALUATION (RAE)

✓ on file
DIRECTOR OF BUDGET

*EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE, OR SECONDARY

ASSOCIATE SUPERINTENDENT

[Signature]
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