

Office Use Only

<i>Date of Board Meeting:</i>	Section 1: General Information:		<i>Agenda Item No.</i>
<input type="checkbox"/> New Grant			<input checked="" type="checkbox"/> Continuation
Complete this side for ALL grants, including classroom grants			
Grant Start/End Dates: <u>07/01/08 – 12/31/08</u>	Application Deadline: <u>06/30/08</u>	Grant Amt: <u>\$77,666.00</u>	
*Funder's Grant Title: <u>Title III, Recently-arrived Immigrant Children and Youth</u>	*Your Grant Title: <u>Title III, Recently-arrived Immigrant Children and Youth</u>		
<small>*e.g. Weller Teacher Mini-Grant, Building Blocks for Success, etc. *e.g. Up, Up and Away, Exploring Our Heritage, Young Galileo's, etc</small>			
Grant Writer: <u>Donald Blair</u>	School/Dept. <u>ESOL/Migrant 9055</u>	Phone <u>(941)927-9000</u>	Ext <u>34329</u>
Grant Contact Person* <u>Donald Blair</u>	School/Dept. <u>ESOL/Migrant 9055</u>	Phone <u>(941)927-9000</u>	Ext <u>34329</u>
<small>*This is the school/district-based person who is in charge of the grant.</small>			
Schools/Programs to be served by this grant	# of staff impacted	# of students impacted	# of parents impacted
High Schools	24	150	300

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

Grant Description

Please type or print neatly in ink. Do not attach separate sheets. Please fill in all blanks. Do not refer to attachments in your summaries.

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 of this grant is to provide additional support to our recently-arrived high school immigrant children and youth.

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

The grant monies will provide supplementary math, reading, writing, and science materials and tutoring services for our recently-arrived high school immigrant children and youth.

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 budget items funded through this grant will include: supplementary math, reading, writing, and science materials and temporary personnel to provide tutoring services.

4. How will grant activities be continued after the end of grant period?
NA (entitlement grant)

Peggy Wiggins		<u>5/19/08</u>
Print Name of Cost Center Head	Signature of Cost Center Head	Date

Send this completed form and 1 copy of your grant to RAE (Grants Office)

Please Type or Print in Ink

GAF: Grant Approval Form

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

(These grants require School Board approval. GAF **must** be submitted by the School Board meeting prior to relevant School Board meeting.)

Fiscal Management will be done by:

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

- Entitlement/Flowthrough
- Competitive/discretionary
- Continuation

Fund Source:

- Federal (indirect cost ~~\$1,553.32~~)
- State
- Local Foundation

Name of Primary Fund Source	Funder's Contact Name	Funder's Address	Phone Number	\$ Amount
Title III, NCLB Immigrant Allocation	Ginger Alberto	325 W. Gaines St. 544 Tallahassee, FL 32399	(850)245-0894	77,666.00



***NOTE: If TECHNOLOGY is part of this grant:**

A memo, signed by the Cost Center Head must accompany this form. The memo must state that:

- a. The school technology personnel has reviewed the physical capabilities of the area involved and that no additional wiring or electrical will be needed to implement the grant beyond what is provided through grant funds.
- b. The memo must be cosigned by Leona Campos. Please call, tell about your project, then FAX your memo to for signature. He will FAX the memo back to you for inclusion with the GAF.



***NOTE: If FACILITY CONSTRUCTION or RETROFIT are part of this grant:**

- c. The memo must be co-signed by Chuck Collins. Please call, tell him about your project, then, if the project is acceptable, FAX your memo to him for signature. He will FAX the memo back to you for inclusion with the GAF.

Thank you. Please call ext 927-9000 ext 32254 with questions.

RAE OFFICE USE ONLY

Section Three: Signatures

RAE personnel will obtain all signatures in this section

***DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION SERVICES**

Natalie Boca 5/19/08

RESEARCH, ASSESSMENT & EVALUATION (RAE)

***DIRECTOR OF FACILITIES SERVICES**

DIRECTOR OF BUDGET

***EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE, OR SECONDARY**

Tom M. White

ASSOCIATE SUPERINTENDENT

[Signature]
SUPERINTENDENT

*Signatures needed only if applicable.

SEND THIS COMPLETED FORM AND 1 COPY OF YOUR GRANT TO RAE (GRANTS OFFICE)