

Office Use Only

Date of Board Meeting:

Agenda Item No.

New Grant

Section 1: General Information:

Continuation

Grant Start/End Dates: Fall 09-Spring 2010 Application Deadline: 1/31/09 Grant Amt: \$3200

Funder's Grant Title: Airborne Your Grant Title: Third Grade Rocks

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: Grant Committee School/Dept. Pine View School Phone 486-2001 Ext _____

Grant Contact Person* Janet Overstreet School/Dept Pine View School Phone 483-2001 Ext _____

*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
Third Grade Class	9	143	volunteers

Does this grant require matching funds? ___ Yes x 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)*

The third grade musical provides students with a unique interdisciplinary experience as well as opportunities that promotes teambuilding and character development. Weaving social studies, reading and writing and are, music and physical education programs together creates a final production that resembles a finely-woven tapestry

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

The third graders will build sets, write plays, learn to dance, sing and perform on stage while learning curricula from multiple subject areas.

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 will include: materials(includes costumes, props and sets)- \$3000, Publicity \$100, Staff \$100, total \$3200

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

This will be a culminating activity for third grade for years to come.

Steven Largo
 Print Name of Cost Center Head

Steven Largo
 Signature of Cost Center Head

1/23/09
 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): *Per D. Henegar*

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

Fund Source:

- Federal (indirect cost \$) _____
- State
- Local Foundation
- Other: *Airbone Teacher Trust*

Name of Primary Fund Source	Funder's Contact Name	Funder's Address	Phone Number	\$ Amount
Airborne Grant	Airborne Grant	NA	NA	\$3200



**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

Von file

*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION SERVICES

Von file *Von file - construction Svcs.*

*DIRECTOR OF FACILITIES SERVICES

[Signature]

RESEARCH, ASSESSMENT & EVALUATION (RAE)

Von file

DIRECTOR OF BUDGET

Von file

*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