

FOR GRANT APPLICATIONS \$2,000 OR MORE

Office Use Only		Agenda Item No. _____
Date of Board Meeting: <u>3-4-08</u>		
<input checked="" type="checkbox"/> New Grant	Section 1: General Information:	<input type="checkbox"/> Continuation
Grant Start/End Dates: <u>10/08-04/09</u>	Application Deadline: <u>02/05/08</u>	Grant Amt: <u>\$3498.45</u>
Funder's Grant Title: <u>Weller Arts Grant</u>	Your Grant Title: <u>Global FCAT Chats</u>	
<small>e.g. Weller Teacher Mini-Grant, Building Blocks for Success, etc.</small>		<small>e.g. Up, Up and Away, Exploring Our Heritage, Young Galileos, etc</small>
Grant Writer: <u>Rebecca King</u>	School/Dept. <u>Booker High VPA Film</u>	Phone <u>355-2967</u> Ext <u>65176</u>
Grant Contact Person* <u>Colleen Glenney</u>	School/Dept <u>Booker VPA</u>	Phone <u>355-2967</u> Ext <u>65180</u>
<small>*This is the school/district-based person who is in charge of the grant.</small>		
<u>Coordinator</u>		
Schools/Programs to be served by this grant	# of staff impacted	# of students impacted
<u>3 immediate, eventually all district schools</u>	<u>2 immediate</u>	<u>100 immediate</u>
Does this grant require matching funds? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		If yes, what amount? _____ How will these funds be raised? _____
Grant Description		
<small>Please fill in all blanks. Do not refer to attachments in your summaries. Do not attach separate sheets.</small>		
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. <i>(Not grant activities)</i>		
<u>The purpose of this grant is to buy a high-end HDV video camera in order to create a professional FCAT instructional video at the high school, middle school, and elementary school levels. All film-makers will learn the art of creating a compelling film as well as enhance their creative editing and production skills. All students in the district will have the opportunity to watch this relevant, informative video that is appealing to students due to its creative nature.</u>		
Briefly list grant program activities <i>(what is going to be done with the grant funds):</i>		
<u>The grant money will be used to purchase a high-end HDV video camera to tape and create an artistic, informative FCAT video. This will first be done at the HS level, and then the HS students will help the middle school students create one for the Ms level, and then the MS students will help the elementary students create one at the elem. level. Each school will get a copy of the DVD for their own use.</u>		
Please provide a brief explanation of pertinent budget items that will be funded through this grant. <i>(Please indicate if funds will be used for new/old staff position, contracted services, travel, materials/supplies, equipment/furniture, facilities, and other applicable items.)</i>		
Materials: Canon HDV Camcorder: \$3399.95 S:H: 31.10 50 DVDs w/Cases: 67.40 TOTAL = \$3498.45		
How will grant activities be continued after the end of grant period? <u>The created video will be used every year to help students prepare for the FCAT. Additionally, the camera will be used to create other student-centered informational videos.</u>		
Constance White-Davis		<u>02/04/08</u>
Print Name of Cost Center Head	Signature of Cost Center Head	Date

Send this completed form and 1 copy of your grant to 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
Community Foundation of Sarasota County		P.O. Box 49587 Sarasota, FL 34230	941-955-3000	\$3498.45

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

N/A Reviewed by RAE

*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION SERVICES

Amy Donner

RESEARCH, ASSESSMENT & EVALUATION (RAE)

N/A Reviewed by RAE

*DIRECTOR OF FACILITIES SERVICES

DIRECTOR OF BUDGET

N/A Reviewed by RAE

*EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE, OR SECONDARY

N/A Reviewed by RAE

ASSOCIATE SUPERINTENDENT

[Signature]
SUPERINTENDENT 4/17/08

*Signatures needed only if applicable.

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