

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: May 1, 2010 – June 30, 2011 Application Deadline: April 8, 2010 Grant Amt: \$750,000

Funder's Grant Title: Enhancing Education through ~~Technology-Competitive~~ Your Grant Title: Growing a STEM Learning Culture
 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: Cantalupo/Donner/ School/Dept. RAE Phone 927-9000 Ext 32172
Binswanger

Grant Contact Person* Denise Cantalupo School/Dept RAE Phone 927-9000 Ext 32172

*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
BHS, SHS, BMS, Brookside MS, McIntosh MS	100	All	All

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)*

1. Provide ongoing professional development designed to raise the technological competence of participating middle and high school instructors.
2. Design and implement technologically-infused STEM instructional programs addressing the Next Generation Sunshine State Standards within an articulated pathway between middle and high school.
3. Develop opportunities to extend learning beyond the classroom.
4. Create and integrate a series of STEM formative assessments with the district's newly designed Comprehensive Computer-Based Instructional Data System

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

Funds will be used to provide teachers at targeted schools with professional development in integrating technology into lessons, along with developing curricula. A new Engineering Technology program will be established at BHS and formative assessments will be developed for science.

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.)*

Contracted salaries, benefits, substitutes, capitalized software, hardware, indirect costs.

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

Professional development will have increased teacher knowledge, lessons and curricula will continue to be used, and formative assessment use will continue.

Natalie Roca

Natalie Roca
Signature of Cost Center Head

4/14/10
Date

Print Name of Cost Center Head

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): _____

Project number, if known: _____

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

Fund Source:

- Federal: Indirect cost \$ _____
CFDA # _____
- State
- Local Foundation
- Other: _____

Name of Primary Fund Source	Funder's Contact Name	Funder's Address	Phone Number	\$ Amount
Florida Department of Education	Charles Proctor, Program Director, Title II-D	Office of Grants Management Florida Department of Education 325 W. Gaines Street, Room 332 Tallahassee, FL 32399-0400	850-245-9318	\$750,000



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

on file Collesano
*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION SERVICES

on file Dumas/Holey
*DIRECTOR OF FACILITIES SERVICES

[Signature]
RESEARCH, ASSESSMENT & EVALUATION (RAE)

on file Gannon
DIRECTOR OF BUDGET

on file Dextman/Cantees
*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