

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: Sept. 30, 2008-Sept.30,2009 Application Deadline: September 19, 2008 Grant Amt: \$250,000

Funder's Grant Title: Charter School Dissemination Grant-FLDOE Your Grant Title: Montessori Live-An Online Training Program
 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: Kym Elder School/Dept. Island Village Montessori Phone 484-4999 Ext _____

Grant Contact Person* Deborrah Metheny School/Dept RAE-Charter Schools Phone 927-9000 Ext 32171

*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
Charter Schools throughout the world	N.A	N.A	N.A

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)

This grant is designed to provide resources to develop and disseminate an online teacher training program consistent with Montessori teaching/learning philosophy. The project will allow the school to disseminate a Montessori based curriculum aligned with the Sunshine State Standards to other Montessori-based charter schools and other schools interested in implementing Montessori practices. The online approach allows teachers to access the training at times convenient to them and to allow for ongoing professional development as skills progress.

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

The grant will be used to develop a website to host 1,200 videos, produce those video resources, complete the curriculum for an online teacher training program and develop dissemination mechanisms to ensure teachers of access to the materials.

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 grant will provide staff for software development, website management, video production, project direction, content development, teacher trainers, program evaluation and administrative assistance. The grant will also fund computers and software, audiovisual equipment and associated materials needed for lesson planning and instructional delivery.

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

School internal resources, combined with university support will continue the project after the grant period.

Deborrah Metheny

Print Name of Cost Center Head


Signature of Cost Center Head

9-18-08

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
FLDOE Office of Grants Management	Jean Miller, Acting Executive Director, Office of Independent Education and Parental Choice	FLDOE Room 325, Turlington Building Tallahassee, Florida 32399-0400	850-245-0496	\$250,000



**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

Nonfile
*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION SERVICES

Nonfile Nonfile
*DIRECTOR OF FACILITIES SERVICES *Construction*

[Signature]
RESEARCH, ASSESSMENT & EVALUATION (RAE)

Nonfile
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