

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., 2010 – June , 2013 Application Deadline: N/A Grant Amt: \$105,580

Funder's Grant Title: Safe Routes to School Your Grant Title: Soaring to School Safely

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: A. Donner School/Dept. Grants Office Phone 927-9000 Ext 32172

Grant Contact Person* Sherri Reynolds School/Dept Pupil Support Svcs Phone 927-9000 Ext 34765

*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
Seven elementary schools: Brentwood, Englewood, Garden, Gocio, Phillippi Shores, Toledo Blade, Tuttle	All	All	All

Does this grant require matching funds? Yes 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 purpose of this non-infrastructure proposal is to increase the number of students walking and biking to seven targeted elementary schools, while increasing student knowledge about pedestrian and bicycle safety and helping to enforce traffic and school speed zones around the school. This meets the NeXt Generation pillar of "Safety."

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

If funded, funds will be used by the school for education, encouragement and enforcement activities, including a Bike Rodeo and Walk to School Days, plus the purchase of curricular and educational 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.)

Grant funds will be used for a teacher stipend (for the Walking Coordinator) at each school, a contracted district-level Walking Coordinator, printing, educational materials, and promotional items to encourage students to walk/bike. This is a reimbursement grant, so district funds will need to be reimbursed with the submission of receipts.

How will grant activities be continued after the end of grant period?
Once the materials are purchased and participation in the Walking School Buses become a habit for students, the program should be self-sustaining. PTO funds may be used to purchase promotional items after the grant period.

Sonia Figaredo-Alberts Sonia Figaredo Alberts 6-22-2010
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
Safe Routes to School Program Florida Department of Transportation	Sarita Taylor	District One Headquarters 801 N. Broadway Avenue P.O. Box 1249 Bartow, FL 33830-1249	863-519-2216	\$105,580



**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

Jok Collesano-onfile

*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION SERVICES

Dumas/Haley ok on file

*DIRECTOR OF FACILITIES SERVICES

[Signature]

RESEARCH, ASSESSMENT & EVALUATION (RAE)

Sannon-ok-onfile

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