GAF: Grant Approval Form

RAE# _____

FOR GRANT APPLICATIONS \$2,000 OR MORE

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Date of Board Meeting:	Agenda Item No. Section 1: General Information: ☐ Continuation									
X New Grant		☐ Continuation								
Grant Start/End Dates:	Jan. 1, 2012- Dec. 31, 2012	Application Dead	line: Dec. 9, 2011	Grant Amt: \$100,000						
Funder's Grant Title:	Target/Ellen DeGeneres	Your Grant		***************************************						
e.g. Weller Teacher Mini-Grant, Building Blocks for Success, etc. e.g. Up, Up and Away, Exploring Our Heritage, Young Galileos, etc										
Wilkinson										
Grant Writer: Melodie	Deeds School	ol/Dept. ————	Phone	361-6477 Ext						
Grant Contact Person*	Melodie Deeds	School/Dept Wil	kinson Phone	361-6477 Ext						
*This is the school/district-based	person who is in charge of the									
Schools/Programs to be	e served by this grant	# of staff impacted	# of students impacted	# of parents impacted						
Wilkinson		All school staff All Wilk		All Wilkinson parents						
Door this ground mani-	o watahina funda?	Vos V No Ifra	as rebat amount?	WE CALL MAIN						
Does this grant require matching funds?Yes _XNo If yes, what amount? How will these funds be raised?										
		Grant Description	L							
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)										
To begin a new summer	enrichment program,	Camp Invention, the	Summer Academy of Ex	ploration, at Wilkinson						
Elementary										
Briefly list grant progra	m activities (what is got	ing to be done with the	grant funds):							
מ אינו אינו אינו	P. C. C. X		4 3	7571						
Purchase materials and supplies for Camp Invention, the Summer Academy of Exploration. These will include										
scientific equipment and probes, arts and crafts materials, props, stage equipment, etc.										
				. (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 purchase durable, reusable equipment and materials so the program can be offered for many years to										
come.										
How will grant activities be continued after the end of grant period?										
Reusing materials purchased with grant funds will allow the program to continue.										
Rousing materials parolla	mod with State railed Mil	a anon mo program to	ommu.							
Ruth Thomas	1 A	Monas /		12/91/11						
Print Name of Cost Center Head										
Frint Name of Cost Center		Signature of Cost Cente	r Head	Date						
Signature of Cost Center riead Sand this completed form and 1 copy of your grant to the Crants Office Research Assessment and Evaluation, I andings										

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.)									
			lement/Flowthrough	Fund Source:					
			petitive/Discretionary	☐ Federal: Indirect cost \$					
☐ School Internal Account		☐ Continuation ☐ Other:		CFDA#					
omer (name).		otnei		State Local Foundation					
Project number, if known:					✓ Local Foundation ☑ Other:				
Name of Primary			Funder's Address						
Fund Source									
Target in collaboration with						\$100,000			
the Ellen DeGeneres Show						w.co,000			
	200000000000000000000000000000000000000								
NOTE: YEAR A YOU TECHNIOT OOK!									
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.									
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		Т	Technology Support Staf	I					
MOTE. IC.	rann muaisat ineraleras	CON	ISTRUCTION or requ	iree D	ETROFITTING en	ace:			
Place cell Tody	Dumas to disouse vo	CON III DE	niect and receive annu	oval to	go forward with v	our proposal.			
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.									
			S OFFICE USE ONL	$\underline{\mathbf{Y}}^{}$					
			on Three: Signatures						
Grants Office personnel will obtain applicable signatures in this section									
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*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION *DIRECTOR OF FACILITIES SERVICES									
Von file									
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RESEARCH, ASSESSMENT & EVALUATION (RAE) DIRECTOR OF BUDGET									
Van fila									
*EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE, OR ASSOCIATE SUPERINTENDENT						NT			
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4 Total									
Alsa Mets									
SUPERINTENDENT									
	*Signa	atures	s needed only if applic	able.					
	- · -								
Send this completed form and 1 copy of your grant to the Grants Office, Research, Assessment, and Evaluation-Landings									