GAF: Grant Approval Form I FOR GRANT APPLICATIONS \$2,000 OR MORE

	Office Use Only		Agenda Item No.				
Date of Board Meeting:							
X New Grant	Section 1: General In	☐ Continuation					
Grant Start/End Dates: March 2009- July 2010	Application Dead		Grant Amt: \$10,000				
Funder's Grant Title: The Braitmayer Foundation	The Braitmayer Foundation grants Your Grant Title: Response to Interv						
e.g. Weller Teacher Mini-Grant, Building Blocks for Succe	- " -	Away, Exploring Our Heritage					
Grant Writer: A.Donner/ D. Cantalupo School	ol/Dept. RAE	Phone	927-9000 Ext 32172				
Grant Contact Person* Denise Cantalupo *This is the school/district-based person who is in charge of the	School/Dept <u>RAI</u> grant.	Phone	927-9000 Ext 32175				
Schools/Programs to be served by this grant	# of staff impacted	# of students impacted	# of parents impacted				
All	All	All	N/A				
Does this grant require matching funds?	Yes X No If ve	s. what amount?	How will				
Does this grant require matching funds?Yes _XNo If yes, what amount? How will these funds be raised?							
	Grant Description						
<u>Please fill in all blanks.</u> Do not refer to attachments in your summaries. Do not attach separate sheets.							
Funds from this grant will allow us to further develop Response to Intervention within the district by providing professional development on RtI to administrators and teacher-trainers at schools. The pillars of Resources, Quality and People by bringing in funds to improve teacher knowledge and their ability to provide services to students. Briefly list grant program activities (what is going to be done with the grant funds): Funds will be used to bring in guest speakers from Florida Problem Solving and Response to Intervention Project at USF and Response to Intervention's Teaching Learning Connections at UCF. Speakers will provide information on RtI to district and school-based administrators, and a Curriculum Writer who will further develop a professional development program for school support teams and teacher-trainers.							
Please provide a brief explanation of pertinent bu used for new/old staff position, contracted services, travel, m \$4,000 will be used for travel and speaker fees Writer to develop and provide the professional	dget items that will be aterials/supplies, equipment by USF and UCF expe	funded through this grant. furniture, facilities, and other a erts. \$6,000 will be used to	pplicable items.)				
How will grant activities be continued after the en Administrator and other training will be complete	d of grant period?		be continued.				
Print Name of Cost Center Head S	ignature of Cost Center	Head	Date				
Send this completed form and I copy of your gr	ant to the Grants Offic	e Research Assessment					

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: National foundation				
Name of Primary Fund Source	Funder's Co Name		Funder's Addres	S	Phone Number	\$ Amount		
The Braitmayer Foundation	Ms. Sabina Taj			6470 Freetown Road, Suite 20087 Columbia, MD 21044		\$10,000		
that no additional complete the proj	nology support pe wiring or electric ect. Please have	ersonnel meal work, be your technical T	le cameras, DVD player tust review the physical beyond what is provided nology support staff ment bechnology Support Staff STRUCTION or requi	capabilithroumber si	ilities of the area invoged the grant, will be a ign off on your project	needed to ct here.		
	d at 361-6311 ext. cluded with your	. 68824. I GAF.	oject and receive approf f approved, you will nee call ext 927-9000 ext. 32	ed to c	reate a memo for his			
GRANTS OFFICE USE ONLY								
*DISTRICT DIRECTOR OF	ETECHNOLOGY I	onnel will	<u> </u>	1/e TECTOR	n this section ON- ROF FACILITIES SER OM- ECTOR OF BUDGET	Or le VICES + Construction		
*EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE, SECONDARY			c, or As	ASSOCIATE SUPERINTENDENT		NT		
Low M. White								
SUPERINTENDENT								
*Signatures needed only if applicable.								
Send this completed form	i and 1 copy of you	ur grant to	the Grants Office, Resea	irch, A	ssessment, and Evalu	ation-Landings		