Please Type or Print in Ink

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

Date of Board Meeting:		Office Use Only		Agenda Item No.						
x New Grant		Section 1: General In	Continuation							
Grant Start/End Dates:	NA	Application Dead	line: 4/12/2010	Grant Amt: \$20,000						
Funder's Grant Title:	Sunsmart Schools E-Shelter	Your Grant	Title: FSEC PV Solar	Panel 10kW Array						
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: Neal Gleitz School/Dept. PineView School Science Phone Ext										
Grant Contact Person*	Neal Gleitz	School/DeptPin	812-219- Ext							
*This is the school/district-based person who is in charge of the grant.										
Schools/Programs to b	e served by this grant	# of staff impacted	# of students impacted	# of parents impacted						
Pine View School Science	Dept K-12	10	2100 PV students; exhbit at GWiz Mueseum approx 146,000 students per year	4-5000						
Does this grant require matching funds?Yes _XNo 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 contributes to the district energy cost savings initiatives.										
Briefly list grant progra	m activities (what is go	ing to be done with the	grant funds):	the guard annual des						
SCSB does not handle funds; all contracting/equipment purchasing done directly by FSEC, the grant provider. The grant will provide all installation costs for a 10kW solar panel array and power regulation hardware. All equipment and labor costs provided by grant.										
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.) Maintenance costs very minimal. Expected lifetime of solar panels is approximately 20-25 years. In event of damage, etc. SCSB would have not to replace panels.										
Any minor cost clearly offset by energy savings.										
How will grant activities No operating cost.	be continued after the en	nd of grant period?								
		Ω	ia:							
STEVE LARGO		Sturn Fan	4/28/10							
Print Name of Cost Center		Signature of Cost Center		Date						
Send this completed for	rm and 1 copy of your o	rant to the Grants Offi	ice Research Assessmen	t, and Evaluation-Landings						

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	Section	Two: Su	mmary for grants ove	er \$2,0	000.				
(These grants re	quire School Board a	approval and	must be placed on the School	l Board A	agenda by Grants Office	staff.)			
Fiscal Management will be done by:			tlement/Flowthrough	Fund Source:					
District Finance Office			npetitive/Discretionary	☐ Fe	☐ Federal: Indirect cost \$				
☐ School Internal Acco☐ Other (name):	unt		tinuation er:	CFDA #					
Project number, if know	n:	- Ouic	J	Lo Lo	nte cal Foundation				
1 Toject number, it known.		□ Ot	Other:						
Name of Primary	Funder's C		t Funder's Addres		Phone Number	\$ Amount			
Fund Source	Name								
FSEC (Florida Solar Energy	NOT PROVIDED		Sunsmart E-Shelter Program	m	321-252-9479	\$20,000			
Comission)			FSEC 1679 Clearlake Road						
			Cocoa, FL						
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			beyond what is provided						
			nology support staff mer						
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			Technology Support Star	.tt					
NOTE: If	your project inv	olves COI	NSTRUCTION or regu	iires Rl	ETROFITTING sr	nace:			
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.									
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6	Grants Office no		ion Three: Signatures	atures i	n this section	1 -			
Grants Office personnel will obtain applicable signatures in this section									
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*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION *DIRECTOR OF FACILITIES SERVICES.									
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RESEARCH, ASSESSM	MENT & EVALUA	TION (RA	(E)	Dik	ECTOR OF BUDGET				
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For White									
SUPERINTENDENT									
*Signatures needed only if applicable.									
Send this completed for	m and 1 copy of	your grant	to the Grants Office, Res	search,	Assessment, and Eva	luation-Landings			