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

		Office Use Only		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4							
Date of Board Meeting:		Agenda Item No.									
X New Grant	2	Section 1: General Inf	Continuation								
Grant Starvend Dates:	g, 2008 – July, 2010	Application Deadl	D D .	Grant Amt: \$300,955							
runder s Grant Title.											
e.g. Weller Teacher Mini-Grant, Building Blocks for Success, etc. Grant Writer: John Zoretich School/Dept. School/Dept.											
Grant Contact Person* John Zoretich School/Dept Phone Ext *This is the school/district based person who is in charge of the grant.											
Schools/Programs to be set	# of students impacted	# of parents impacted									
All district elementary schools		All elementary school teachers	All elementary school students	All parents of elementary schoolers							
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 project supports the NeXt Generation pillars of People, Quality and Resources. Its goals are to increase parent											
involvement in the child's literacy development, encourage children and their parents to work through early literacy											
skills and strategies, as well as encouraging parents to become a positive and caring force in their child's reading											
development. These help achieve the district's goals to improve student literacy and reading abilities.											
Briefly list grant program activities (what is going to be done with the grant funds): Partners in Print series will be purchased and made available to elementary schools. A coordinator and three teachers from each school will present workshops to parents to increase parent involvement and improve literacy skills and strategies in our students.											
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 money will be used to purchase the Partners in Print program, including the English and Spanish libraries and companion materials. It also will pay for consumable materials and refreshments. In addition, one coordinator per school and three teachers per school will present workshops to parents.											
How will grant activities be continued after the end of grant period? The grant includes funds to <u>maintain</u> the Literacy Corner, and teachers will continue to use the new knowledge gained from the workshops long after they are over. If the Community Foundation does not renew funding, other activities will end.											
John A. ZORETI		CA Luc	tel	5-9-08							
Print Name of Cost Center Hea		Signature of Cost Cente		Date							
Send this completed form and 1 copy of your grant to the Grants Office, Research, Assessment, and Evaluation-Landings											

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Please Type or Print in Inl		GAF: G	rant Approval Form	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.)												
☐ District Finance Office ☐ Co☐ School Internal Account ☐ Co		□ Com	lement/Flowthrough petitive/Discretionary inuation r:	Fund Source: Federal (indirect cost \$) ——— State Local Foundation (Community Foundation) Other:								
Name of Primary Fund Source	Funder's Contact Name		Funder's Address		Phone Number	\$ Amount						
Community Foundation of Sarasota County	Wendy Hopkins		2635 Fruitville Road Sarasota, FL 34237-5222		941-556-7152	\$300,955						
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												
*DISTRICT DIRECTOR OF TECHNOLOGY INFORMATION SERVICES *DIRECTOR OF FACILITIES SERVICES						RVICES						
RESEARCH, ASSESSM	E)	DIRECTOR OF BUDGET										
*EXECUTIVE DIRECTOR SE	E, OR A	ASSOCIATE SUPERINTENDENT										
SUPERINTENDENT												
*Signatures needed only if applicable.												

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