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

Office Use Only							
Date of Board Meeting:							
New Grant	Section 1: General Information:		X Continuation				
Grant Start/End Dates: 8/1/2010 – 7/31/2011	Application Dead	ine: July 1, 2010	Grant Amt: \$700,000				
Funder's Grant Title: e.g. Weller Teacher Mini-Grant, Building Blocks for Succ	Center Program						
Grant Writer: Peggy Wiggins School/Dept. Academic Interventions Phone 927-9000 Ext 31139							
Grant Contact Person* Peggy Wiggins School/Dept Academic Interv. Phone 927-9000 Ext 31139 *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							
Alta Vista, Gocio, Tuttle, Emma E. Booker,	30	1,100	2,000				
Wilkinson, Booker Middle 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 provides funding for after school and summer remediation and enrichment programs for students and their							
families in Title I eligible schools in north Sar							
years of funding for this program that touches on all five pillars of NeXt Generation Learning: People, Quality, Service,							
Resources, Safety							
Briefly list grant program activities (what is going to be done with the grant funds):							
The school district, in partnership with several community based organizations, will provide mentoring and tutoring in math, reading, and writing as well as provide enrichment activities in science, visual and performing arts, technology, and recreation. They will also provide service learning opportunities, and character education programs. These are afterschool and summer programs.							
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.) Contracted personnel: Project management, site facilitation, teachers and help.							
Transportation will be provided through the grant.							
Materials and supplies will be provided to each site through the grant. Specified staff will be required by the state to attend state conference and national workshop.							
How will grant activities be continued after the end of grant period?							
Continuation funds will be sought through other grants and external sources.							
Peggy Wiggins left 10							
Print Name of Cost Center Head	Signature of Cost Cente		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 Inl	GAF: G	rant 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: A District Finance Office School Internal Account Continuous		lement/Flowthrough petitive/Discretionary inuation r:	wthrough Fund Source:			
Name of Primary Fund Source	Funder's Contact Name	Funder's Address	S Phone Num	ber \$ Amount		
Department of Education Bureau of Family and Community Outreach Lani Lingo Director of the 21st CCLC Program		325 West Gaines Street, Room Tallahassee, FL 32399-0400	325 (850) 245-08:	\$700,000		
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 INFORMAT SERVICES		TION *DIR	*DIRECTOR OF FACILITIES SERVICES			
RESEARCH, ASSESSMENT & EVALUATION (RAI		E)	DIRECTOR OF BUDGET			
*EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE SECONDARY		E, OR A	ASSOCIATE SUPERINTENDENT			
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						

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