## FOR GRANT APPLICATIONS \$2,000 OR MORE

Date of Barrel Washing	Office Use Only		Lagrada Itana No						
Date of Board Meeting:  New Grant	Section 1: General Inf	Agenda Item No.  X Continuation							
New Grant	Section 1. General in	<u>x</u> Continuation							
Grant Start/End Dates: 7/1/10 - 6/30/11	Application Dead	ine: 4/30/10	Grant Amt: \$366,133						
Funder's Grant Title: Carl D. Perkins – Secondary	Your Grant	Title: Carl D. Perkins - Seco	ndary Career & Technical Progr.						
e.g. Weller Teacher Mini-Grant, Building Blocks for Succ		Away, Exploring Our Heritage,	Young Galileos, etc						
Grant Writer: Mellissa Morrow School/Dept. Career & Technical Ed. Phone 927-9000 Ext 31104									
Grant Contact Person* Mellissa Morrow School/Dept CTE Phone 927-9000 Ext 31104 *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						
All middle and all high schools	1.5 professional and	7,000+							
An initiale and an ingli schools	60+ CTE teachers	7,000	7,000						
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)									
		~							
To provide supplemental funding for the enh	ancement of secondary	Career and Technical E	ducation programs within						
the school district.									
Briefly list grant program activities (what is g									
Grant activities include, but are not limited t									
in applied Curriculum and other instructions settings; and the coordination of special need									
Perkins Section 131 projects provide addition									
secondary career and technical programs.									
Please provide a <b>brief</b> explanation of pertinent	budget items that will b	e funded through this grant	(Please indicate if funds will he						
Please provide a <b>brief</b> explanation of pertinent <b>budget items</b> that will be funded through this grant. ( <i>Please indicate if funds will be used for new/old staff position, contracted services, travel, materials/supplies, equipment/furniture, facilities, and other applicable items.)</i>									
Funds will be expended for: 1.5 professional staff, contracted consultants, travel, materials, equipment, industry									
certification, curriculum, professional development and Career & Technical Student Organization support.									
How will grant activities be continued after the end of grant period?									
Continuation funding through Entitlement.									
		-							
Mellissa Morrow	10 1/1		6/2/						
Director, Career and Technical Ed.  Print Name of Cost Center Head	Signature of Cost Center	or Head	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	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		(				
The Control of the Co		- Com	inuation	State Local Foundation					
☐ Other (name):		: Local Foundation  Other:							
Name of Primary Fund Source	Funder's Co Name	nder's Contact Funder's Addr		s Phone Number	\$ Amount				
4 - C - C - C - C - C - C - C - C - C -				850-245-9041					
Carl D. Perkins Secondary Career & Technical Education	Chris Ciardo		Florida Dept. of Education Bureau of Grants Management 325 West Gaines Street, Rm. 3 Tallahassee, F 32399-0400	Total President Control Contro	\$366,133				
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									
				through the grant, will be					
complete the pro	ject. Please have	your tech	nology support staff mer	mber sign off on your proje	ect 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 *DIRECTOR OF FACILITIES SERVICES					RVICES				
SERVICES  SERVICES									
RESEARCH, ASSESSMENT & EVALUATION (RAE)			E)	DIRECTOR OF BUDGET					
RESEARCH, ASSESSMENT & EVALUATION (INTE)									
*EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE SECONDARY		E, OR	ASSOCIATE SUPERINTENDENT						
SUPERINTENDENT									
	*	Signatures	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									

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