Please Type or Print in Ink

GAF: Grant Approval Form

RAE#		

FOR GRANT APPLICATIONS \$2,000 OR MORE

		OFFICE USE ONL					
Date of Board Meeting:				Agenda Item No.			
X New Grant	Sec	tion 1: General Infor		4 *			
☐ Continuation				itted to RAE:			
Grant Start/End Dates:	September 2009	Grant Application		Grant Amt: 30,000			
Funder's Grant Title:	McCarthey Dressman Educat	ion Your Grant	Title: Differentiated In	struction			
e.g. Weller Arts Education,		etc. e.g. Up, Up an	d Away, Exploring Our Herita	ge, Young Galileos, etc			
Grant Writer: Janet C	Nerstreet School	ol/Dept. Pine View S		486-2001 Ext			
Grant Contact Person*	Janet Overstreet	School/DeptPine	e View School Phone	486-2001 Ext			
*This is the school/district-based	person who is in charge of the	grant.					
Schools/Programs to be	e served by this grant	# of staff impacted	# of students impacted	# of parents impacted			
Pine View Teachers		108	2000	NA			
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.		er to attachments in yo		o 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 is a Teacher Development Grant that will give 10,000 for three years to a team that is formatting and implementing groundbreaking k-12 classroom instruction. Pine View has chosen to promote Differentiated Instruction as the strategy to boost student understanding and proficiency for student learning							
Briefly list grant progra	m activities (what is goi	ng to be done with the	grant funds):				
Year 1 will be the informative year, where an expert will come and train the team leaders to have a better understanding of what Differentiated Instruction is and to meld their knowledge into lesson plans that can be trained for teachers in year two. The implementation year where the strategies that have been developed will be implemented to the students at the school. Year 3 will be the evaluation year to ensure the success of the project.							
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.) The budget will entail stipends for teachers, materials and supplies and a consultant fee for the three year project.							
How will grant activities be continued after the end of grant period?							
This will build a more defined curriculum for the gifted population at Pine View School and will continue long after the grant is over. Send this completed form and 1 copy of your grant to the Grants Office, Research, Assessment, and Evaluation-Landings							
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(These grants require		Section Two: Summary for		,				
Fiscal Management will be done by: District Finance Office School Internal	ne by: District Finance Office Competitive/Discretionary Continuation		Fund Source: Federal (indirect cost \$) State Local Foundation					
Account	11		Other:					
Other (name). Name of Primary Fund Soi	irce	Funder's Contact Name	Funder's Address	Phone				
McCarthey Dressman Education Foundation		Funder's Contact Name	610 South Temple Street Suite 10 Salt Lake City, Utah 84102	Number 801-328- 8899				
		School/Cost Center	Annrovals					
		these approvals to ensure that	nt your request can be successfully					
imp	oleme	nted using existing systems ar	nd capabilities at your site.					
☐ Additional work required to complete project		☐ Additional work required to complete project						
☐ No additional work required to complete project			☐ No additional work required to complete project					
Sturn Farlo		4/30/09						
Signature of Cost Center H	ead	Date	Signature of Technology Support Staff	Date				
Steven LARGO Print Name of Cost Center Head			Print Name of Technology Support Staff					
Gr	ants (GRANTS OFFICE Section Three: Administration Office staff will obtain applica	rative Signatures					
Vonfile			Vonfile					
District Director of Technology Information Services APPROVED: ☐ Yes ☐ No			Director of Construction Services APPROVED: XYes □ No	1 1				
Wenn Ciku			Vonfile					
Executive Director, Research, Assessment, and Evaluation			Director of Facilities Services APPROVED: □ Yes □ No					
Reviewed: VON +11e			(, (),					
Executive Director of Elementary, Middle, or High Schools			Director of Budget APPROVED: □ Yes □ No					
Reviewed: Associate Sup	erint	endent						
APPROV	ED:_	Kon' White Superintendent of	DATE: 5/21/89					