

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

Office Use Only

Date of Board Meeting: \_\_\_\_\_ Agenda Item No. \_\_\_\_\_

New Grant **Section 1: General Information:**  Continuation

Grant Start/End Dates: Fall 2012/Spring 2013 Application Deadline: June 5, 2013 Grant Amt: \$5,000.00

Funder's Grant Title: Weller Teacher Grant Your Grant Title: Lights!Camera!Action!Bringing Learning...

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: Freda Williams School/Dept. Phillippi Shores Elementary Phone 361-6424 Ext \_\_\_\_\_

Grant Contact Person\* Freda Williams School/Dept Phillippi Shores Phone 361-6424 Ext \_\_\_\_\_

\*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
Phillippi Shores Elementary	6	120	

Does this grant require matching funds? Yes  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)*

The purpose of this grant is to integrate arts into academic subjects. These experiences will improve language skills and increase motivation to learn. This grant will support our School Improvement Plan in the areas of writing and reading.

Briefly list grant program activities *(what is going to be done with the grant funds):*

This program includes Florida Studio Theatre's Write a Play program plus 3 additional workshops to support the final product which will be a class quilt for each 4<sup>th</sup> grade classroom to be entered into the Embracing our Differences exhibit in the spring of 2013.

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 include fees for Florida Studio Theatre, materials for projects, and field trip costs.

How will grant activities be continued after the end of grant period?

We are piloting this extended Florida Studio Program and if it is successful we would like to extend the program to the entire school the following year.

ALBERT P. BEZILLA Albert P. Bezilla 2/3/2012  
 Print Name of Cost Center Head Signature of Cost Center 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 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.)

Fiscal Management will be done by:

- District Finance Office
- School Internal Account
- Other (name): \_\_\_\_\_

Project number, if known: \_\_\_\_\_

- Entitlement/Flowthrough
- Competitive/Discretionary
- Continuation
- Other: \_\_\_\_\_

Fund Source:

- Federal: Indirect cost \$ \_\_\_\_\_  
CFDA # \_\_\_\_\_
- State
- Local Foundation
- Other: \_\_\_\_\_

Name of Primary Fund Source	Funder's Contact Name	Funder's Address	Phone Number	\$ Amount
The Community Foundation Weller Teacher Grant	The Community Foundation	P.O. Box 49587 Sarasota, FL. 34237 Or 2635 Fruitville Road Sarasota, FL 34237	941 556-7172	\$5,000.00



**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

*on file*  
*[Signature]*

\_\_\_\_\_  
\*DIRECTOR OF FACILITIES SERVICES *constr. svcs.*

*on file* *on file -*

\_\_\_\_\_  
RESEARCH, ASSESSMENT & EVALUATION (RAE)

\_\_\_\_\_  
DIRECTOR OF BUDGET

\_\_\_\_\_  
\*EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE, OR SECONDARY

*on file*

\_\_\_\_\_  
ASSOCIATE SUPERINTENDENT

\_\_\_\_\_  
*[Signature]*  
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