	Please	Type	or	Print	in	Ink
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RAE#	

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

Date of Board Meeting:	Office Use Only		lgenda Item No.
New Grant	Section 1: General In	formation:	Continuation
Grant Start/End Dates:	Application Dead		Grant Amt: \$100,000
Funder's Grant Title: Target/Ellen Degeneres	Your Grant		
e.g. Weller Teacher Mini-Grant, Building Blocks for Success  Grant Writer:   Deb Pappas School	Cranherry	Away. Exploring Our Heritage Phone	, Young Galileos, etc <b>9414803</b> <b>400</b> Ext
Grant Contact Person* Deb Pappas  *This is the school/district-based person who is in charge of the	Ouncon 20pt	nberry Phone	Ext
Schools/Programs to be served by this grant	# of staff impacted	# of students impacted	# of parents impacted
Entire School	45	750	
Does this grant require matching funds? _ these funds be raised?	_Yes _X No If yes	what amount?	How will
	Grant Description	1	
Please fill in all blanks. Do not re	fer to attachments in yo	our summaries. D	o not attach separate sheets.
Briefly summarize the overall purpose/objective goals of your School Improvement Plan and/or D This grant will allow funds to acquire Ipads fo The Ipads will be used with Reading and Math This will increase scores on FAIR and FCAT a Briefly list grant program activities (what is go. The funds will be used to purchase Ipads. Techno Elementary.  Please provide a brief explanation of pertinent by used for new/old staff position, contracted services, travel, n	istrict Plan. (Not grant r the students of Crant Apps to increase students.  ing to be done with the blogy obtained will enhance	activities) aberry Elementary. dent fluency of skills.  grant funds): ance learning in all subject	t areas at Cranberry  t. (Please indicate if funds will be
How will grant activities be continued after the ending and some and all states.	nd of grant period?		
Print Name of Cost Center Head  Send this completed form and 1 copy of your g	Signature of Cost Jente		Date  and Evaluation-I and ings

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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.)							
·	quire School Board a	pproval and i	must be placed on the Schoo	l Board Agen	da by Grants Office s	staff.)	
			ement/Flowthrough	Fund Sou		<u> </u>	
☐ District Finance Office		☐ Comp	petitive/Discretionary nuation	☐ Federal: Indirect cost \$  CFDA #			
School Internal Acco	unt		c:	□ State			
☐ Other (name): Project number, if know	n'	- Other					
Project number, it know.	11.			Other			
Name of Primary Fund Source	Funder's Co Name					\$ Amount	
	NOTE: If	/AIOR T	ECHNOLOGY is par	t of this gr	ant:		
that no additional	(does nology support p	not include ersonnel m	le cameras, DVD players review the physical beyond what is provided nology support staff me	<b>ers, etc.)</b> capabilitie d through t	es of the area involves the grant, will be i	needed to	
	4		Technology Support Sta	.ff	.:		
Please call Jody He can be reache	Dumas to discued at 361-6311 expended with you	ss your pr .t. 68824. : ir GAF.	STRUCTION or required and receive appropriate and receive approved, you will not sail ext 927-9000 ext. 3	roval to go eed to creat	te a memo for his	our proposai.	
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  (1) A file    (2) A file    (3) A file    (4) A file    (5) A file    (6) A file    (7) A file    (8) A file    (8) A file    (9) A file    (1) A file    (1) A file    (1) A file    (2) A file    (3) A file    (4) A file    (5) A file    (6) A file    (6) A file    (7) A file    (8) A file							
*DISTRICT DIRECTOR (	F TECHNOLOGY	INFORMA	TION *DII	RECTOR O	F FACILITIES SE	RVICES CINSTY.	
70, 8	SERVICES (			Von	file		
RESEARCH, ASSESSMENT & EVALUATION (RAE)  ĎIRECTOR OF BUDGET							
	on file						
*EXECUTIVE DIRECTOR	R OF ELEMENTAL ECONDARY	ry, Middi	LE, OR	ASSOCIAT	E SUPERINTEND	ENT	
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							
Send this completed fo	rm and 1 copy of	your grant	to the Grants Office, Re	searcn, Ass	essment, and Eva	inanon-ranamés	

Rev 9/9/09