RAE#		

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

Date of Board Meeting:	Office Use (	Inty	Agenda Item No.				
X New Grant	Section 1: Genera	Continuation					
Grant Start/End Dates:  Funder's Grant Title:  SWFWMD Splast	10ul C	rant Title: The Florida Hor	Grant Amt: 4,986 use Garden is Florida Friendly!				
e.g. Weller Teacher Mini-Grant, Building Blocks Grant Writer: Stephanie Dunda  Grant Contact Person* Stephanie Dur  *This is the school/district-based person who is in ch	School/Dept. 1391 School/Dept _	g and Away. Exploring Our Herito LUVI (DA) Lechnical Phone 1391 HS. Phone					
Schools/Programs to be served by thi	s grant # of staff impac	ted # of students impacte	d # of parents impacted				
Suncoast Polytechnical High School	12	154	154				
Does this grant require matching funds?Yes x_No If yes, what amount? How will these funds be raised?							
	Grant Descri	tion					
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 Florida House has partnered with Suncoast Polytechnical High School. When the Florida House reopens this year, they will highlight local green builders, designers, and of course a Florida friendly garden. Since Polytech is next door to the Florida House, our students will be responsible for designing, constructing, and maintaining a Florida Friendly Garden. They will do prereading in English class with SWFWMD materials. The prereading will help us to meet our SIP reading goal of 83% of FCAT 3, the data collection will help us to meet our SIP goal of 92% proficiency in math.							
Briefly list grant program activities (w 1. Field trips to Selby, Sarasota Garde 2. Gardening supplies for garden desi 3. Art supplies for landscape design	en Club, and Florida Nati		SEP 1 5 2000				
Please provide a brief explanation of per used for new/old staff position, contracted service 1. pH/DO meters- 400.00 2. transportation- 2100.00 3. plants, shovels- 1024.00 4. art supplies- 400.00 5. Selby admission- 1078.00							
How will grant activities be continued after the end of grant period?  Garden will be maintained by the Florida House/ SPHS students.							
Jennifer Putnam Print Name of Cost Center Head Send this completed form and 1 copy of	Signature of Cost)C of your grant to the Grants		9/11/08_ Date it, 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.)								
☐ District Finance Office ☐ C School Internal Account ☐ C		Com	ompetitive/Discretionary Continuation her:		Fund Source:  ☐ Federal (indirect cost \$) ———— State ☐ Local Foundation ☐ Other:			
Name of Primary Fund Source	Funder's Co Name		Funder's Address	S	Phone Number	\$ Amount		
SWFWMD-	->		2379 Broad Brooksville, PL	_	500-423- 1476	4982		
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								
*DISTRICT DIRECTOR OF	Grants Office per	Section Sectio	on Three: Signatures I obtain applicable signa  \( \bigcup \lambda \cong	itures in	of Facilities Ser	vices enstruction		
*EXECUTIVE DIRECTOR SEA	of Elementar condary	y, Middli	E, OR A	SSOCIA	ATE SUPERINTENDE	NT		
Superintendent								
*Signatures needed only if applicable.								
Send this completed form	n and 1 copy of yo	our grant to	o the Grants Office, Rese	arch, A	ssessment, and Evalu	ation-Landings		

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