

Please Type or Print in Ink

GAF: Grant Approval Form

RAE# \_\_\_\_\_

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: August 11, 2008-June 2,2009 Application Deadline: none Grant Amt: \$229,048.05

Funder's Grant Title: Oprah's Angel Network Your Grant Title: Helping Students Helps Their Families Too

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: Pamela Inman School/Dept. Booker High PBD Phone 355-2967 Ext 65325

Grant Contact Person\* Peggy Wiggins School/Dept Academic Intervention Prog. Phone 927-9000 Ext 31113

\*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
5 High School Performance Based Diploma Programs	5 will be hired, 20 staff in PBD programs	Approximately 1000 over school year	Approximately 1400

Does this grant require matching funds? Yes  No  If yes, what amount? \_\_\_\_\_ How will these funds be raised? \_\_\_\_\_

Grant Description

AUG 29 2008

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)

Stop gap measure to replace the position of Home School Liaison in the Performance Based Diploma [PBD] drop out Prevention programs at the five high schools. With the restructuring of the Guidance Departments of the high schools, the PBD Home School Liaison positions were cut. Their impact on keeping students in school and working toward graduation was tremendous. The purpose of this grant was to find funding rehire Home School Liaisons so there would be no loss of service to the students.

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

Hire five social workers or guidance counselors as Home School Liaisons for the Performance Based Diploma drop out prevention programs in the five high schools. Once funding is secured, the Human Resources Department would post the positions. Once hired, Payroll Department would handle the disbursement of funds. Since this grant is being written to Oprah Winfrey, the name of the position Home School Liaison would be changed to Oprah's Angels if funded. NBC channel 8 from Tampa would be encouraged to do press coverage of Oprah's donation and impact on community.

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.)

5 Contracted services Master's Degrees @ \$28.33/hour, 7.5 hours + .75 hours\* per day = 8.25 hour/day for 196 days [\*to allow for planning, parent conferences, home visits, district meetings not to take away from student time] to total \$45,809.61 each, a total of \$229,048.05 for five Home School Liaisons.

How will grant activities be continued after the end of grant period? A proposal had been sent to Lori White, Peggy Wiggins and the Executive Committee by Pamela Inman, a PBD math teacher from Booker High, explaining where there is funding in the district. At this time, it is not an option - corporate contracts would have to be renegotiated. By working on it during the 2008-2009 school year, funding may become available for 2009-2010 school year.

Peggy Wiggins  
Print Name of Cost Center Head

[Signature]  
Signature of Cost Center Head

8/28/08  
Date

Send this completed form and 1 copy of your grant to the Grants Office, Research, Assessment, and Evaluation-Landings

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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.)

Fiscal Management will be done by: <input type="checkbox"/> District Finance Office <input type="checkbox"/> School Internal Account <input type="checkbox"/> Other (name): _____	<input type="checkbox"/> Entitlement/Flowthrough <input type="checkbox"/> Competitive/Discretionary <input type="checkbox"/> Continuation <input type="checkbox"/> Other: _____	Fund Source: <input type="checkbox"/> Federal (indirect cost \$) _____ <input type="checkbox"/> State <input type="checkbox"/> Local Foundation <input type="checkbox"/> Other: _____
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Name of Primary Fund Source	Funder's Contact Name	Funder's Address	Phone Number	\$ Amount
Oprah's Angel Network	Attn: Funding Request	110 North Carpenter Street Chicago, IL 60607		\$229,048.05

**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	_____ *DIRECTOR OF FACILITIES SERVICES & Construction
_____ RESEARCH, ASSESSMENT & EVALUATION (RAE)	_____ DIRECTOR OF BUDGET
_____ *EXECUTIVE DIRECTOR OF ELEMENTARY, MIDDLE, OR SECONDARY	_____ ASSOCIATE SUPERINTENDENT

\_\_\_\_\_  
 Leri M. White  
 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