BETHEL EDUCATION FOUNDATION

*Grant Application*

*Please see the Application Guidelines for submission guidelines*

|  |  |
| --- | --- |
| Application Submission Date |  |
| School Name |  |
| Project Director Name(s) |  |
| Grade(s) and/or Subject(s) Taught  |  |
| Daytime Phone Number |  work, home or cell? |
| Work Email Address |  |
| Project Title |  |
| Requested Grant Amount | **$** |
| Date funds need to be available |  |

**PROJECT DESCRIPTION**

***Briefly describe your project.***

**INNOVATION**

***Describe how this project is innovative or has creative qualities***.

**ADVANCEMENT**

***Describe how it will engage students, enhance their learning and the curriculum, or promote advancement of skills that support the educational goals of the Bethel Public School System, St. Mary’s School of Bethel or the Bethel community***.

**IMPACT & SUSTAINABILITY**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| *# directly involved in project:* | Students |  | Teachers |  | Grade(s) |  |
| *# indirectly impacted:*  | Students |  | Teachers |  |  |  |

***Should the program receive initial funding, will the program be able to sustain itself after initial funding? Explain how***.

***For technology purchases, explain how you will seek funding for software updates and/or the future purchase of “apps”***.

**IMPLEMENTATION**

***Please list the goals this project hopes to achieve or accomplish:***

*
*
*
*

***Plan of Action****:* ***Explain how you plan to execute and accomplish your objectives***.

***Timeline: Provide a time schedule for the implementation for your project. (If your project is time-specific, please indicate in which weeks or months it would occur.)***

**NEED**

***Given the Foundation’s grant criteria and mission, explain why you think your project should be selected and what needs it fulfills. Please avoid redundancy and be specific in providing your reasons***.

**Are other funds, alternative or joint, available to support this project from another source (PTO, BOE, Booster Club)?**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

***If yes, please describe what efforts you have made to obtain such funds and clarify their relation to your grant.***

**Does your project link to the current school year’s school/district priorities?**

*Note: checking ‘no’ does not affect the review of your request*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

***If yes, please describe how.***

**BUDGET**

***Below or on a separate sheet, provide a detailed, itemized list of the supplies and expenses you anticipate for the project. List each item on one line and the associated cost next to it. Include any in-kind or other funding contributions along with their sources. (The application is not complete without an itemized budget attached.)***

***For hardware or equipment purchases, explain how you will provide for its safe storage***.

**Responsibilities of Grant Recipients**

* The Project Director is highly encouraged to present this application at the BEF board meeting. If the project director is not available, the request will still be reviewed based solely on the written proposal.
* The Project Director is required to complete the BEF Evaluation Form within 3 months following the start of the project. The final report should contain visuals and/or graphics illustrating activities or results of the project. (The evaluation form can be downloaded from our website).
* The Project Director may be asked to allow BEF Directors to quietly observe the class engaging in the project.
* Return any unused grant funds remaining at the end of the project to the BEF. The Project Director acknowledges that approved funds must be expended within 90 days otherwise the money will be returned to the BEF.

**Signatures of Approval:**

Project Director/Applicant (required)

*By signing here, the Project Director acknowledges that approved funds must be expended within 90 days otherwise the money will be returned to the BEF. A copy of the final purchase order must be sent to Bethel Education Foundation.*

School Administrator (required)

BEF Teacher Liaison at your school (required)

Superintendent of Schools\*

*\*Required for any proposal over $5,000 or if the proposal that includes a technological component.*

**Completed applications must be received by BEF by the deadline posted on the BEF website. Applications must be submitted by email, but a hard copy with signatures can be submitted by email (as a pdf), mail or by hand. Applications must include all documentation and signatures to be considered complete.**

**Mailed applications must include be sent to:**

Bethel Education Foundation

PO Box 92

Bethel, CT 06801

Attn: Grants

**Email:** betheledfoundation@yahoo.com

**Incomplete applications will not be considered for funding.**

**Office Use Only**:

Date the proposal was reviewed

❑ Accepted Grant Amount Paid - Check # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

❑ Denied Reason:

❑ Contingent on:

❑ Listed on BEF website and Facebook page ❑ Photos received from Project Director

❑ Evaluation report and copy of final purchase order received from Project Director Date:

Notes: