**Grant Cover Sheet**

*(Replace parenthesis with appropriate information)*

(Grant Title - Be Creative)

(Applicant Name)

(Grade Level)

(Brief Description Paragraph – Make it fun!)

**Greens Prairie Elementary PTO**

**Teacher Grant Application 2017-2018**

*Application not to exceed 2 pages*

[*Grant Guidelines 2017-2018*](https://docs.google.com/document/d/1kSaLqQXbae2YBtbtLb0PiEjPB5jKbXPz0l5ec-6RJhQ/edit?usp=sharing)

**Grant Title:**

**Principal has reviewed and approved this grant:     \_\_\_\_\_\_\_Initials**

**School Secretary has verified Approved Vendors:   \_\_\_\_\_\_\_Initials**

**Grade(s): Subject(s):**

**Number of students impacted:    Requested Grant Amount:**$

**Purpose: (Expectation of outcomes in general terms)**

**Objectives: (Objectives must be measurable in terms of student behavior or performance)**

**Description of instructional procedures, methods or activities which will be utilized:**

**Project Evaluation:**

**Grant Budget Sheet**

**Grant Title:**

Please list all supplies needed for your grant project.  Please obtain firm quotes in writing from each vendor, if at all possible, and attach to your application.  You must use APPROVED VENDORS, or prove “Sole Source” for a vendor not on the list.  You may use more than one page.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Budget Item** | **Vendor** | **Unit Cost** | **Shipping** | **Qty.** | **Total Cost** |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |
| 5. |  |  |  |  |  |  |
| 6. |  |  |  |  |  |  |
| 7. |  |  |  |  |  |  |
| 8. |  |  |  |  |  |  |
| 9. |  |  |  |  |  |  |
| 10. |  |  |  |  |  |  |
| 11. |  |  |  |  |  |  |
| 12. |  |  |  |  |  |  |
| 13. |  |  |  |  |  |  |
| 14. |  |  |  |  |  |  |
| 15. |  |  |  |  |  |  |
| 16. |  |  |  |  |  |  |
| 17. |  |  |  |  |  |  |
| 18. |  |  |  |  |  |  |
| 19. |  |  |  |  |  |  |
| 20. |  |  |  |  |  |  |
|  |  |  |  |  | Page TotalGrand Total***Only on last page*** | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_$\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Grant application MUST BE submitted **NO LATER** than 4:00 pm, December 4, 2017.

**Please submit your application to** dbarrington@csisd.org **for approval.**

Contact Lindsey Matthews if you have questions or concerns: lindseyrmatthews@gmail.com or 979-777-8369.