

**GRANT PROGRAM - APPLICATION**

Complete the application below and send it to Kara Flynn: Kara.Flynn@k12.sd.us. For more information, please see grant guidelines document, located at [www.rcpsfoundation.org](http://www.rcpsfoundation.org).

Grants are awarded twice a year. **Deadlines for consideration are October 1 and March 1.** Awarded funds should be available by December 1 and May 1 respectively.

If you have any questions about the application or the process, please contact Kara Flynn ([Kara.Flynn@k12.sd.us](mailto:Kara.Flynn@k12.sd.us))

**Please select the type and category of grant application:**

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| **Type** | **Category** |
| * Small Grant (Limit of $2,000) * Large Grant ($2,000+, maximum amount at the discretion of the grants committee) | * Grade Level Reading Proficiency by the end of 3rd grade * 21st Century Learning * Innovative Teaching and Leadership/Professional Development * College and Career Readiness * School-Community Partnerships * Need-Based Student Development * Innovative Initiatives |

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| **Applicant’s Name** |  |
| **School** |  |
| **Grade Level/Subject** |  |
| **Title of Grant Proposal** |  |
| **Grant Proposal summary**  (100 words or less that clearly state existing need, grant goals (or big ideas) and how the proposal will address student learning.) |  |
| **Date submitted** |  |
| **Amount requested** |  |
| **Grant Deadline Date**  **(select one)** | **October 1or March 1** |

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| **Problem Statement or … *“Why do you need this grant?”***  This describes why the funds are needed. |
| **Problem Statement:** |

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| **Project Design or *…“What does your proposal include?”***  This section includes outcomes or objectives, action steps, a timeline and how many students will be included in this project. |
| **Objectives or …*“What do you want the students to KNOW and/or BE ABLE TO DO ? “***  ***(*Objectives are written for the student and they state what the student is expected to know or do as a result of the action/instruction. Objectives are specific, observable and measurable learning outcomes. Please list objectives.** |
| **Action Steps or… *“How will the project proceed, step by step?”*** |
| **Timeline or … *“When will the project start and what is timeframe for the completion?”*** |
| **Number of Students or … *“How many students will meaningfully be impacted by this project?”*** |

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| **Budget or… “*What do you need and what will it cost?***  In the table below, please list what resources you will need, the cost and where you suggest they should be purchased. |

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| **Resources Needed** | **Cost** | **Purchasing Information** |
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| **Assessment or … *“How will you know if student learning was impacted?”* How will you assess the impact of this grant on student learning? Describe how you will assess the ‘before and after’ in relation to student learning. Please see website to find assessment questions to be answered in the assessment report (due one month after the project is complete).** |
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| **Questions** |
| **1.Have you requested or received full or supplemental funding from any other source? (Yes or No) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If so, please explain:** |
| **2. If this grant proposal is not fully funded, will the grant writer accept a lesser amount? (Yes or No) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **3. Will this grant be part of matched funding? (Yes or No) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **If you answered yes, do you need RCPSF to act as a fiscal sponsor?**  **(Yes or No) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Please explain.** |

Grantee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please forward all completed applications to Kara Flynn, Executive Director RCPSF, [Kara.Flynn@k12.sd.us](mailto:Kara.Flynn@k12.sd.us).