

## Application Instructions

### Purpose:

The Teacher Impact Grant program is a resource to provide classroom and instruction related expenses that will enhance educational opportunities and provide innovative programs to the students of Manatee County Public Schools.

### Guidelines and Important Information:

- The Teacher Impact Grant program will award teacher grants at \$1,000 each.
- Incomplete applications will not be considered for review.
- Applications **must be typed** and include the Cover Sheet, Project Overview, and Budget.
- If applying as a team, submit only one application per team. Please include all team member names on application.
- Approval is required from your school principal to ensure that appropriate administrative personnel are aware of your submission of the grant application.
- Applicants will be **notified by early October** whether or not their grant was awarded.
- Grant funds will be disbursed October 26, 2017 at the Teacher Grant Reception to be held at Renaissance on 9th at 4:30 P.M.
- Completed applications can be emailed to [wattersona@manateeschools.net](mailto:wattersona@manateeschools.net) or mailed to the Manatee Education Foundation at 1023 Manatee Avenue West, Suite 215, Bradenton, FL 34205 no later than **September 15, 2017**.
- All grant recipients agree to submit an evaluation form and receipts of project expenditures by **May 31, 2018**.
- If no evaluation is provided, applicants will be excluded from the following year's grant review.

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**Important Form Instructions:** First, save the form to your computer before filling out the data fields. Open the form with Acrobat or Acrobat Reader to complete, print and save for your records. Then submit your completed form and project overview pages as directed in the application instructions.

# Application Cover Sheet



Project Title: \_\_\_\_\_

School Name: \_\_\_\_\_

Grade Level(s): \_\_\_\_\_ Number of Students Impacted: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Team Grant:    Yes    No    List other team members: \_\_\_\_\_

Which category fits your project best? **(Choose only one category)**

_____ Arts & Culture	_____ Children with Disabilities	_____ Environment
_____ Health & Fitness	_____ Professional Development	_____ Literacy
		_____ STEM

Primary Contact's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that this grant application has been reviewed and has my approval:

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please deliver all completed materials via email, mail, or hand delivery to:



**Manatee Education Foundation**  
1023 Manatee Avenue West, Suite 215  
Bradenton, FL 34205  
Email: [wattersona@manateeschools.net](mailto:wattersona@manateeschools.net)

# Project Overview



Please type and attach the following information about your project in the order presented.

## 1) Project Description

Give an overview of the project you have designed for your students. What do you propose to do? Where, when, and why?

## 2) Project Objectives

List measurable objectives you propose to accomplish. Explain how this project will enhance standard classroom activities and what skills will be learned.

## 3) Project Evaluation

How do you propose to measure success? Be specific. The plans for evaluation must be realistic and measurable. Anecdotal observations are encouraged.

## 4) Project Timeline

Give an estimated project start to completion timeline.

## 5) Project Budget

Use Project Budget Form below. Carefully calculate your budget to show how the \$1,000 will be used. Itemize and/or categorize to fit the fields provided.

**Allowable Costs:** Contracted Services, Materials, Supplies, Audiovisuals, Software, Educational Field Trips and Equipment.

**Non-Allowable Costs:** Clothing, Gifts, Awards, Entertainment, Food(unless integral to the project), Stipends to Students, Chaperones/Aides, Supplements to Grant Managers and Recreational Field Trips.

# Project Budget

Description	Unit/Cost	Item Total
		<b>Total \$</b>