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**2024 Grant Application**

**Cover Page**

**General Information:**

**Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Applicant’s Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Co-applicants (if any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project Information**

**Project Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Funding Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grade or Grades that will benefit from this project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Approximate number of students that will benefit: \_\_\_\_\_\_**

**Approximate number of teachers: \_\_\_\_\_\_\_\_**

**Project Description**

Please describe your proposed project by answering each of the following six questions.

**1. Project Overview:**

Please provide a **brief** summary paragraph of your project. Be sure to include your rationale. In other words, what educational needs will this project address and how will it benefit students? Also include how this project is innovative and creative.

**2. Goal(s):**

Please state the goals that you wish to achieve by referring to the grant criteria provided in the grant guidelines. Goals should be attainable, measurable, and clearly defined.

**3. Procedures:**

Please describe in detail, the procedures and/or activities required to implement this project.

**4. Timeline:**

Provide a detailed timeline outlining your goals for planning and implementing your project. The timeline should also include start and completion dates. ***\*Note: Grants awarded in June 2024 must be implemented by the end of the 2024-2025 school year. All purchases must be made by December 31, 2024. If not, monies will be rescinded and redistributed.***

**5. Evaluation:**

How will the effectiveness of this project be measured? Also, explain how you will share the benefits of your project with other teachers and schools in Bellingham.

**6. Budget:**

Provide an itemized budget for the project. Include the cost of planning, implementing, and sustaining the project. Detailed costs for supplies, materials, and equipment must be based on actual quotes. Also, please indicate if you are receiving supplemental funding from another source. (The BEF reserves the right to request any and all documentation that substantiates the cost of your request. Board members may contact you if they have any more questions.)

**Signature Page** (Please attach to your completed application)

By submitting this application, I acknowledge that if awarded the grant, I will:

 • Implement the project as described

 • Notify and seek approval from the Bellingham Educational Foundation for any changes to the goals of the project.

 • Notify the Bellingham Educational Foundation if I leave the school district before the project is completed.

 • Acknowledge that any supplies or materials purchased by this grant are and will remain the property of the Bellingham Public School System.

 • Provide a written evaluation of the project to the Bellingham Educational Foundation by the end of the 2024-2025 school year.

 • Work with the Bellingham Educational Foundation to publicize the grant to the rest of the school system and the community.

Applicant signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As principal, I support this application and believe it to be consistent with the curriculum and goals of our school.

Principal signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*Grants involving technology purchases require an additional signature below:

As technology director, I support this application and believe it to be consistent with the technology plan for the district.

Technology director signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please submit your signed proposal by **March 25, 2024** to Bellingham Educational Foundation, PO Box 546, Bellingham, MA 02019, or as an email attachment to belledgrants@gmail.com with “grant submission” in the subject line.

If you have any questions, please contact Melissa Nagle at belledgrants@gmail.com.