



Innovative Learning Grants

**Grant Application Packet for WJCC Employees
2017-2018 School Year**



Innovative Learning Grant Application Cover Page

Project Title: _____

| Name of Applicant(s) | Signature of Applicant(s) |
|----------------------|---------------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

School(s): _____

Grade(s): _____ (list each grade level) Subject(s): _____

Number of Students _____ Amount of Grant \$ _____

Primary target population to be served:

- Students (target group: _____)
- Parents
- Teachers

Implementation Dates: _____

Signature of Principal: _____ Date: _____

For applications where funds will be used to purchase technology and/or media equipment:

Signature of Senior Director of Technology, Brian Landers: _____

(brian.landerson@wjccschools.org)

For applications where funds will be used for construction or maintenance:

Signature of Senior Director of Operations: _____



Innovative Learning Grant Application

IMPORTANT – Do NOT include the name of your school in the Project Title or application

Project Title: _____

Grade(s): _____ (list each grade level) **Subject(s):** _____

Number of Students _____

Check ONE: this project is:

- New to the division
- New to my school
- New to me

Check ONE: have you received funds for this project from WJCC Schools Foundation previously?

- Yes
- No

Please note that the Foundation seeks to fund new and innovative ideas. Applicants may submit grants that are similar to those previously awarded that build upon or otherwise innovate on the previous concept.

Directions: Please provide a summary for each area listed below:

Abstract: (no more than 100 words):

Need: (describe the area of student achievement you wish to address and give any data that supports the need. Please include how this grant addresses district and school goals):

Objectives: (state measurable objectives in terms of student behavior or performance or other):



Description of Proposed Project/Activity (describe what you want to do with the grant funds. List activities & applicable timelines by being as specific as possible. How is it innovative?):

Evaluation Strategy: (describe how you will know if your objectives are met using measurable goals. How will you share your program's successes with your peers?):

Partners (if any): (list any roles other schools, community partners, and/or entities may have in your project. If possible, include a letter of support and/or contact information of representatives):



Directions: Note the budget distribution for each category. Be specific.

| Budget Items | Amount | Vendor | Budget Code (business office use) |
|---|---------------|---------------|---|
| Supplies (please list) | | | |
| | | | |
| | | | |
| Equipment | | | |
| | | | |
| | | | |
| Contracted Services (list consultants) | | | |
| | | | |
| | | | |
| Other | | | |
| | | | |
| Total | | | |

Grant Applications should be submitted to WJCC Schools Foundation electronically.

Email application as an attachment to WJCCFoundationGrants@wjccschools.org by November 7, 2017. The signature page will need to be printed, scanned, and emailed to WJCCFoundationGrants@wjccschools.org. Electronic or ink signatures are acceptable.



WJCC Schools Foundation

Criteria for Grant Approval Reviewer Score Sheet

Application Number: _____ Evaluator: _____

Project Title: _____

Please rank the effectiveness of each item with 5 being high and 1 being low. Circle the number that best describes each statement:

| <i>Criteria</i> | 5 | 4 | 3 | 2 | 1 | Weighted Amount | Weighted Total |
|--|---|---|---|---|---|-----------------|----------------|
| Need is clearly stated. Supports division & campus goals. | | | | | | X3 | |
| Objectives are specifically stated and measurable. | | | | | | X3 | |
| Innovation is apparent. Activities/procedures are specifically stated and related to purpose & objectives. | | | | | | X3 | |
| Evaluation strategy is clearly stated and relevant to the objectives & student performance. | | | | | | X2 | |
| Budget is complete, realistic, accurate, and appropriate. | | | | | | X1 | |
| Grand TOTAL: | | | | | | | |

Please check the statement below that best describes how you would rank this application:

- I would definitely recommend funding this project.
- I would recommend partial funding. Amount: \$ _____
- I would recommend funding this project if there were extra money.
- I would not recommend funding this project.

Additional Comments (use back if necessary):