



## BEF GRANT APPLICATION FORM

Date: \_\_\_\_\_

Applicant's Name(s): \_\_\_\_\_

School (circle):      WHITON ELEMENTARY      STONY BROOK      BCMS

Applicant's Position(s): \_\_\_\_\_

Applicant's Email Address(es): \_\_\_\_\_

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

Total Budget Request: \$ \_\_\_\_\_ (Include EXACT numbers below)

Is/are the vendor(s) school approved? YES NO\*

\*please note, vendors MUST be approved or the grant will not be considered.

If full funding were unavailable, would partial funding be beneficial? (If yes, explain below). YES NO

Provide SPECIFIC DETAILS for your budget request. Include information such as kinds of materials and equipment needed, sources of supply and costs. Be specific -EXACT VALUES whenever possible- as no grant will be considered without this information. Add more lines if needed.

<u>ITEM/EVENT</u>	<u>SUPPLIER</u>	<u>COST</u>

In one paragraph, give a summary description of the grant. Be sure to highlight innovative, creative and/or enhanced educational experiences and opportunities. (attach further description if needed)

**BRANCBURG EDUCATION FOUNDATION GRANT APPLICATION FORM CONTINUED**

Answer the questions below; adjust spacing as needed.

**1. When do you plan to implement your project? Please include a timeline. If appropriate, also indicate by when you need to hear a response from the BEF regarding this grant.**

**2. Approximately how many pupils will be affected by this project? Explain your number.**

**3. Is this project a requirement of a specific class? YES / NO If yes, please clarify which class.**

**4. What are the student learning outcomes from this program? When possible, highlight how the program will complement the school curriculum.**

**5. Has this proposal been submitted to any other funding source? YES NO If yes, please list source and amount of request.**

**If awarded a grant, the applicant agrees to SHARE THE RESULTS (via a feedback form) with the Branchburg Education Foundation within 30 days of project implementation. If you are sending pictures or videos, please indicate if photo release forms have been signed for all of the participants.**

_____ Applicant's Signature	_____ Print name	_____ Date
_____ Signature of Building Principal	_____ Print name	_____ Date
_____ Signature of Supervisor of Curriculum, Instruction and Assessment	_____ Print name	_____ Date
_____ Signature of Superintendent	_____ Print name	_____ Date

**Note: For grant of \$1000 and above, the applicant(s) may be asked to speak on behalf of the program to the BEF board at the next meeting.**