



**MONTGOMERY ISD EDUCATION FOUNDATION**

**GRANT APPLICATION**

**DATE SUBMITTED** \_\_\_\_\_

<b>Grant Title:</b>	
<b>Name of Applicants</b>	<b>Campus</b>
<b>Total Amount of Funding Requested</b>	<b>\$</b>
<b>Grade(s):</b>	
<b>Subject(s):</b>	

**Applicant Signature(s):**

**Principal Signature(s):**

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Grant Title: \_\_\_\_\_

Vendor	Item#	Description	Unit Cost	Qty.	Cost x Qty.	Shipping	Total Cost
<b>Total</b>							<b>\$</b>

Please provide the following information for each vendor:

Vendor	Address (Street, City, State, Zip Code)	Phone #	Fax #

**Grant Title:** \_\_\_\_\_

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

**Total Amount Requested \$** \_\_\_\_\_

Item(s) Requested	Quantity	Cost

**Please describe the program you would like to bring to your classroom/campus & why these items listed above are needed?**

**What makes this program unique – or – how does this program enrich student learning?**

**How does this program enhance student engagement?**

**Please describe how this project complements your campus Action Plan.**

**How will your classroom instruction change because of this project?**

**Please explain how you will measure the success of this project (in addition to STAAR, Benchmarks, & EOC results)? If needed, use another page to describe in detail.**

**If you are requesting funding for technology:**

- **Describe how this technology will enhance student engagement.**
  
- **Describe your training plan for this technology.**

**Can this project be continued in future years?**

Yes       Yes, with additional funding       No

**Will you receive other funds for this project/program? (Campus funds etc.)**

Yes\*       No

\*If you answered yes, please list potential funding sources with amounts:

**If proposal is technology, special education, or ESL based, have you submitted your idea for endorsement by these departments?**

Yes, this application was reviewed by:       No

**Has this program been implemented at your campus as either a pilot program or as an active part of instruction? If yes, please describe how the program has been used.**

Yes       No

**Do you plan to share this program within your grade level or with other grade levels at your campus?**

Yes       No