

SMALL GRANT APPLICATION

**Caledonia Education Foundation Mission Statement**

The purpose of the Caledonia Education Foundation is to promote our community of learners by identifying, enhancing, or initiating those programs that are not or would not normally be underwritten by the Caledonia Community School District.

To that end, the Foundation will encourage excellence in educational activities for all learners.

While the Foundation is independent in organization and responsibility, its clear intention is to pursue the above goals in close cooperation with the Caledonia Community School Board, Administrators, Teachers, Students and Community.

The Foundation designates an annual sum to be awarded in the form of small grants for programs and enhancements that directly affect students. Examples of Foundation small grants include materials or equipment for special projects or programs or payment for learning experiences brought to the classroom. After-school programs and parental involvement projects are also eligible for funding. Items that will **NOT** be eligible for funding include snacks and teacher course work or conferences.

Small grant budgets may include any items that strive to deepen student engagement and promote active learning, as long as there is a strong rationale in the application for the purchase of these items.

Small grant applications are accepted throughout the school year by the 5th of each month. The CEF board will be asked to approve qualified small grant applications and applicants will be notified by the end of the month. Funds will be released once the grant contract is signed.

**Grant Application Deadline**

5th of each month September – May

**Caledonia Education Foundation Small-grant Application**

**Grant Amount Requested must be between $100.00 - $500.00: $ \_\_\_\_\_\_\_\_\_\_**

# Project Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant’s Group/Organization/Building: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**1. Give a brief description of the project and the key activities included. Be specific about *a.* what the project will entail, *b*. how many students will be involved, *c*. how the students will be engaged throughout the project, *d*. your goals and expected results:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**2. Please list 1 or 2 benchmarks that explain how this grant aligns with the Michigan Standards and Benchmarks:**

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**3. Was this proposal unable to be funded through the standard school budget? YES NO**

**4. List any schools, businesses, or organizations that you are partnering with on the grant project.** Describe matching funds, donations of services or products from business/community partners

|  |  |
| --- | --- |
| **Partners** | **Name(s), Title(s) and Phone(s), Amount** |
| Within Caledonia Schools |  |
|  |
|  |
|  |
| Business and/or Community |  |
|  |
|  |
|  |

**5. How will the grant dollars be spent? Please itemize the specific materials and resources in your budget below or attach to this grant.**  Please make sure costs are carefully researched.

|  |  |
| --- | --- |
| **Item** | **Proposed Expense / Actual** |
| **1.** |  |
| **2.** |  |
| **3.** |  |
| **4.** |  |
| **5.** |  |
| **6.** |  |
| **TOTAL AMOUNT** | |

**6. You will be expected to provide us with the results of your grant via email, letter, video, pictures, etc.**

**7. Please attach promotional materials, brochures, or documentation that will help explain your grant request if applicable.**

The Caledonia Education Foundation has an interest in making sure funds and programs are going to be used and implemented as proposed. A report documenting actual spending will be required as a part of fulfilling your grant commitment.

Please have the responsible parties acknowledge their support of this project and the grant request by signature below:

Grant Writer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (sign) \_\_/\_\_/\_\_

(required) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print)

Phone:

School Principal/Director/Superintendent:

(required) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (sign) \_\_/\_\_/\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print)

Phone:

Additional School Partner

(if applicable):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (sign) \_\_/\_\_/\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print)

Phone:

**Please submit completed application to the Caledonia Administration Office**

**P.O. Box 353, Caledonia, MI 49316 \* 616.891.0732 \* info@caledoniacef.org**