

HEF use only: Title _____ Grant amount \$ _____ Grant # _____

Rcvd: _____ Approved: Yes _____ No _____ Date approved: ____/____/____



Fall Grants Application Deadline:
Monday, March 13, 2017 5:00 pm

Project title:

Insert project title here

Project Category of Application: (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Classroom-based program/project that directly benefits students | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Multi-building collaboration – Two or more school buildings working collaboratively. | <input type="checkbox"/> Start-up costs |
| <input type="checkbox"/> Enhancement to curriculum that brings student to or above grade level | <input type="checkbox"/> One-time purchase |
| | <input type="checkbox"/> Addresses achievement gap |

Amount Requested:

Insert \$ Amount

School(s) Affected:

Insert School(s) here

Project Committee

A three-member committee (usually applicant plus two others) must be established to oversee the project for its duration.

Applicant (Primary Contact)	Title	Subject/Grade Level
School	Telephone	Email
Second Contact	Title	Subject/Grade Level
School	Telephone	Email
Third Contact	Title	Subject/Grade Level
School	Telephone	Email

SIGNATURE PAGE

PROJECT TITLE:

By signing, the grant applicant assures that they have discussed this proposal with their principals or supervisors, have verified that funding for the project is not available from normal school or District sources, will commit the time needed to conduct the work described in this application, and will complete the required status and final grant report. By signing, principals and supervisors assure that the project team members have approval to implement the project and that the project meets the overall mission of their site or program within the District.

Applicant's signature	Date
Principal/Supervisor's signature	Date

Be sure to include all 5 sections:

- 1) Title and Applicant Page
- 2) Signature Page
- 3) Project
- 4) Project Evaluation and Acknowledgement
- 5) Budget

Return signed, completed document by:

Monday, March 13, 2017 at 5:00 pm to:

HEF Grants Committee
1001 Highway 7
Suite 243
Hopkins, MN 55305

Questions? Please call HEF office. Phone: 952-988-4149

PROJECT DETAILS AND DESCRIPTION

Change spacing within this application as necessary. If more pages are needed, please add project title to each page.

PROJECT TITLE:

Project Summary (150 words max):

What is the need or rationale for the project:

Who are the learners to be affected:

How many learners would be affected (primarily):

Describe the activities of the project and provide a timetable of events:

How will this project provide new and/or unique learning opportunities:

Describe specific student learning outcomes of the project, both measurable and intrinsic (know, do, value, create), and how these outcomes will be reached:

PROJECT EVALUATION AND ACKNOWLEDGMENT

PROJECT TITLE:

Describe how this project will be evaluated. How will you evaluate the degree to which the specific learning outcomes have been achieved? Include a description of how and with whom the results of the evaluation will be shared. Note: Please provide HEF a copy of the evaluation and any pictures or publications.

In what ways will you be able to publicly acknowledge support provided by the Hopkins Education Foundation?

DRAFT

Upon your projects completion, who will be able to present (and when) a 15-minute summary of the project to the HEF board?

Please describe the project in 2-4 sentences. This will be used for HEF promotional materials.

PROJECT BUDGET

PROJECT TITLE:

Project Budget Specifics (you may attach your own format)

Provide specific information about costs, which may include outside fees and services, materials, equipment, supplies and other expenses. Be advised that HEF typically does not fund meals, lodging, transportation and the like. To insert additional rows, click on table below and then click the pull-down menu "Table", click "Insert" and finally click "rows above" or "rows below"

Description of expense requested from HEF	Estimated Cost (\$)
List any other sources of support (School District, PTO, Business Partners, etc.). Please indicate if support is cash or in-kind.	Funds Committed
Amount from other sources	
Amount requested from HEF	
Amount from other sources	
Total project costs	

Cooperating Organization:

If this project involves a cooperating organization, please attach a letter of participation that states the cooperating organization's contributions and responsibilities. Such collaboration is desired but not required.

Check here if such a letter is attached ___