



PANHANDLE ALLIANCE *for* EDUCATION

2010 Grant Award Application

Submission Instructions - Please complete this grant application electronically. Save your file as **Grant_Application_2010.yourname** and forward to your school principal for approval. Principals should Email completed and approved applications directly to grants@panhandlealliance.org. Original signatures will not be necessary if electronically submitted through Email by principals. **Electronic submissions are preferred; however, if you must submit in hard copy form, signatures are required.** Mail completed application with signatures to:

**Panhandle Alliance for Education
PO Box 1675
Sandpoint, ID 83864**

We do not accept applications by FAX

All grants must be received by midnight, Friday, March 5, 2010.

Applicant Information — Please assign a Project Director as the primary contact person for your grant. All communication between the Alliance and your project team should be directed through this person.

Project Director's Name:

Other Collaborators:

School/Facility Name:

Project Director's Address

Project Director's E-mail Address:

Project Director's Phone Number(s):

School:

home:

Briefly describe Project Director's current position with school district, grade or classes taught, years with school district, awards and grants received, and demonstrated ability to meet deadlines and complete projects.

Grant Request Information

- Grant Category: ___ Teacher Investment Grant
 ___ School Investment Grant
 ___ Diehl Grant for Music & Arts Education
 ___ Dave and Laurie Wall Grant for Math and Science
 ___ Master Class Grant
 ___ Special Investment Grant
 ___ District Leadership Grant
 ___ BIG Idea Grant (one to three year duration)

Number of students served or affected by proposed project:

Number of teachers served by or involved in proposed project:

Assign a name to describe your grant:

Total grant dollar amount requested:

(Dollar amount must match budget portion of this application)

Project Narrative

Project Purpose and Goal Describe the project in 250 words or less. Define its scope and anticipated benefits in student achievement. If a Master Class grant is proposed, describe the expert who will offer the class and the nature of the instruction. You may provide supplementary articles or other material about the master teacher.

Student Involvement Describe the number and type of students served by the project. Define how often or the amount of time students will spend with the project.

Collaborative Model Describe the anticipated interaction between the teacher(s) and students, and between other teachers/administrators, in the development and implementation of the project. If a Master Class grant is proposed, carefully describe the intended interaction between the students and master teacher.

Evaluation Plan Describe the plan and timeline for assessing and evaluating the project's success in meeting its student achievement goals.

Project Budget: Identify items that will be purchased and describe how the requested money will be used. Include as much detail as possible; add additional explanation if necessary in paragraph form following the budget tables below. Include any anticipated funding or in-kind services from other sources as well. For technology, please include costs for replacement parts and installation. If you are requesting stipends or other forms of financial payment to school employees, you must include the cost of benefits and taxes. Please contact Lisa Hals, LPOSD Business Manager, for appropriate rates. All stipends will be paid through the LPOSD Business Office.

1 Year Teacher Grant Request:

#1-X	BUDGET ITEMS	HOW USED	\$ AMOUNT
1.			
2.			
	TOTAL:		\$

BIG IDEA, 1-3 year grant request:

#1-X	BUDGET ITEMS / HOW USED	1 st Year \$	2 nd Year \$	3 rd Year \$	Total:
1.					
2.					
3.					
4.					
	TOTALS #1-X:	\$	\$	\$	\$

Previous Grants Have you or any of your team members received a Panhandle Alliance for Education grant before? If so, did you file an interim or final evaluation? If not, why?

Project Acknowledgments

Signature of Project Director _____ date _____

Signature of School Administrator _____ date _____