



2021-2022 Teacher Mini-Grant Application

The WilliamSPORT Area School District Education Foundation's Teacher Mini-Grant Program is designed to give WASD teachers the opportunity to enhance educational opportunities and activities for students through innovative and creative projects and programs. Teacher Mini-Grants provided by the foundation may be awarded **up to \$1,500** per project.

Grant Requirements and Limitations:

- **Deadline:** Applications must be submitted to the WASDEF office at the District Service Center no later than **4:30 p.m. on Friday, Oct. 22, 2021.**
- Applications must be complete to be considered. This includes a clearly designed plan and a detailed budget, including researched costs.
- Applications **must have all required signatures** or it will not be considered. It is STRONGLY recommended that applicants get the signatures of these individuals well in advance of the deadline. **Applications submitted to the Foundation office without all required signatures will not be considered.**
- Applications will be evaluated and reviewed for recommendation by the foundation's Finance and Allocations Committee for **full WASDEF board approval on Wednesday, Nov. 10.**
- **Applicants will be notified about their grant status on or by Friday, Nov. 12, 2021.**
- Grants will be awarded based on innovation, creativity, educational value, enrichment benefits and sustainability of the activity.
- All equipment, materials, and non-consumable items become the property of WASD once the project is completed or discontinued.
- A teacher may only receive **one** Teacher Mini-Grant grant per year.
- Grants will not be given for parties, incentive gifts, or classroom supplies.

An Outcomes Report must be submitted to the Foundation office at the DSC no later than Friday, May 27, 2022. The evaluation should include a narrative explanation, pictures and any other pertinent information — *including copies of ALL receipts/invoices* — to demonstrate the success of the activity or program. **Previous grant recipients with an outstanding Outcomes Report(s) will not be considered.**

Any and all publicity associated with the grant program must state that the program or project was supported through the Teacher Mini-Grant Fund at the WilliamSPORT Area School District Education Foundation.



Teacher Mini-Grant Application Checklist

As you go through the steps of completing your application, please use this checklist to ensure the application is completed correctly.

Checklist:

- I have researched all costs and set forth a detailed budget (page 6 of the application).
- No grant money will be used for parties, student incentives, or regular classroom supplies.
- My proposal is clearly defined in terms of the numbers of students participating, the frequency of any activities or events, and the extent of any transportation requirements.
- I have included a typed, double-spaced summary of the project.
- My grant request has been approved/signed by the appropriate individuals.
- I have acquired all required signatures.

Remember, successful applications typically

- *include a culminating event, project or activity,*
- *provide students with a novel experience, and/or*
- *involve students in activities not normally funded by the school district,*
- *show sustainability (can continue without future funding).*

PRINT NAME: _____ Date: _____

BUILDING: _____

PROJECT/PROGRAM TITLE: _____

Include this page at the top of your application. **Please DO NOT STAPLE your application, as it will need to be scanned and copied.**



Grant Application
for Teachers
2021-2022

“Creating powerful classrooms and inspiring futures.”

Applicant(s): _____

E-mail: _____

Building Phone Number(s): _____

Applicant(s)'s Signature & Date:

School(s) benefiting from these funds:

_____ Cochran Primary
_____ Hepburn-Lycoming Primary
_____ Jackson Primary
_____ Stevens Primary

_____ Curtin Intermediate
_____ Lycoming Valley Intermediate
_____ Williamsport Area Middle School
_____ Williamsport Area High School

If funded I/we agree to submit Post-Project Evaluation by May 27, 2022.

Teaching Grade Level & Curriculum Areas Emphasized in Project:

Assistant Superintendent:

Signature Date

Building Principal:

Signature Date

Curriculum Supervisor(s):

Signature Date

Signature Date

Proposal/ Project Title: _____

Amount Requested: \$ _____

1. Which Pennsylvania State Standards, Performance Standards or Benchmarks are being met through this project for enrichment?

2. How are you going to evaluate the success of the project with respect to student learning?

_____ Samples or exhibits of student work

_____ Other data tools

_____ Pictures/videos

_____ Other: Please identify

_____ Written student testimonials

_____ Student Productions

Brief description of what will be done with the tool(s) identified above:

3. In the event of budgetary constraints, can this project be completed with partial funding? If so, what aspects of the project would be emphasized and/or changed?

4. Are you receiving additional funding for this project? Please list other sources and amounts.

I. Project Narrative (No more than two pages, double-spaced.)

Please include *who, what, why, when and how*. Also, please include your intended timeline for this project, and benefit for educational growth and enrichment.

The narrative must reflect:

- *A clear link to improving student achievement.*
- *Goals that are long-term and ongoing, including statement of need and a plan to address the need, and outlines how to measure its success.*
- *An introduction of a uniquely new and creative/imaginative activity.*
- *A project that can be used to reinforce the district's educational program.*
- *A project that provides considerable benefit to the student experience.*
- *A project that **demonstrates sustainability**.*

II. Budget

The detailed budget should show a description of all purchases and projected expenditures. Please list the costs of books, materials, tools, equipment, supplies, etc.

Item	Quantity	Cost per Unit	Total Cost	Supplier or Source (if identified)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				

TOTAL: _____

PLEASE RETAIN A COPY OF THIS APPLICATION REQUEST FOR YOUR RECORDS.