

**2017-2018
ENGAGEMENT GRANT
APPLICATION**



School: _____ Amount requested: \$ _____ (*May not exceed school allocation*)

Title of your project: _____

Project lead(s): Name(s): _____ Teaching Assignment/Position: _____

Person writing this proposal: Name: _____ Teaching Assignment/Position: _____

Number of actual student participants: _____ Grade level(s): _____

Number of students affected by this project: _____ Cost per student: \$ _____

Is this a one-time request/event or a multi-year project? One-time On-going

How will you sustain the project beyond initial funding? _____

Are you using or seeking funds from another source to complete or enhance this project? Yes No
If yes, complete info below

Funder	Dollar Amount	Items or services purchased using additional funds	Status of Request
			<input type="checkbox"/> Application in process <input type="checkbox"/> Funds confirmed
			<input type="checkbox"/> Application in process <input type="checkbox"/> Funds confirmed
			<input type="checkbox"/> Application in process <input type="checkbox"/> Funds confirmed

PROJECT NARRATIVE

1. Provide a detailed description of your project. How does this project align with the guidelines of the Engagement Grant?

2. Briefly describe the items and/or services will you be purchasing using FVPS grant funds.
An itemized list is required on the budget page of this application.

3. What barriers, if any, will prevent students from participating? (*e.g. transportation, language, parent involvement, etc.*)

4. What is the impact on student learning?

5. If the project focus is for a subset of your student body, how might the project impact other students not directly involved?

6. What data and/or metrics will you use to measure success?

BUDGET

- ✓ Itemize your project expenditures in the table below.
- ✓ If your proposal includes text, classroom sets or curriculum materials, you are required to itemize EACH title, author and publisher.
- ✓ Calculate any shipping and handling charges and 8.4% WA State Sales tax. S & H fees ARE taxable.
- ✓ If the materials you are requesting do not currently appear on the AIM list or in Destiny, an application for approval of their use must be in process with the IMC committee prior to submitting this proposal.

Qty	Item Description	Vendor Name	Unit Cost	Total	Approved Instructional Materials (AIM) Status
					<input type="checkbox"/> Not applicable to this item <input type="checkbox"/> Title appears on AIM/Destiny list; # <input type="checkbox"/> Approval pending / Application Date:
					<input type="checkbox"/> Not applicable to this item <input type="checkbox"/> Title appears on AIM/Destiny list; # <input type="checkbox"/> Approval pending / Application Date:
					<input type="checkbox"/> Not applicable to this item <input type="checkbox"/> Title appears on AIM/Destiny list; # <input type="checkbox"/> Approval pending / Application Date:
					<input type="checkbox"/> Not applicable to this item <input type="checkbox"/> Title appears on AIM/Destiny list; # <input type="checkbox"/> Approval pending / Application Date:
					<input type="checkbox"/> Not applicable to this item <input type="checkbox"/> Title appears on AIM/Destiny list; # <input type="checkbox"/> Approval pending / Application Date:
					<input type="checkbox"/> Not applicable to this item <input type="checkbox"/> Title appears on AIM/Destiny list; # <input type="checkbox"/> Approval pending / Application Date:
					<input type="checkbox"/> Not applicable to this item <input type="checkbox"/> Title appears on AIM/Destiny list; # <input type="checkbox"/> Approval pending / Application Date:

Project Budget (continued)

ASSURANCES

We agree to support the planning, implementation and completion of this project as described in this proposal. (Please sign to indicate your agreement.)

Project Lead (Signature): _____

Date: _____

Principal Signature): _____

Date: _____

Please email to WenLyn.Richter@vansd.org or mail to Foundation for VPS.

For FVPS Internal Use Only:

This grant has been reviewed against the FVPS Engagement Grant guidelines.

Approved

Denied

Signature: _____

Comments: _____

VPS Executive Director of Teaching & Learning: Please indicate your decision regarding this engagement grant request:

Approved

Denied

Signature: _____

Comments: _____
