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**Guilford Fund for Education**

**Grant Application**

**Please complete this grant proposal, obtain the required signatures at the end of this application and submit via email to** [**grants@gffe.org**](mailto:grants@gffe.org)**. Thank you for applying for a grant from GFFE.**

|  |
| --- |
| Project Title: |
| Project Applicant /Coordinator: |
| Phone: |
| Email: |
| Agency Administrator, if different from the applicant: |
| Email: |
| Agency/School Name of Grant Project: |
| Agency/School Address of Grant Project: |
| Agency/School Telephone: |
| Anticipated Start Date: |
| Total Amount Requested from GFFE: $: |
| Describe this grant project in one hundred words or less. (#1): |
| Your Signature (type your name): |
| Date: |

**Grant Description**

1. Please describe your grant in detail; be sure to include information about the following:

a. What are your immediate and long-term learning outcomes or goals for this grant?

b. Describe the elements of the project that will achieve these learning outcomes or goals.

c. How will you assess the success of your grant in achieving these goals?

d. How is this grant program new or innovative to Guilford? or How does it add an innovative element to an existing program?

**Grant Impact**

2. Please describe the impact of your grant; be sure to include information about the following:

a. How many will be directly impacted by the grant?

b. Will your project repeat from year to year?

c. Can your project be duplicated over time or expanded outside your organization (subjects, grades, schools, if applicable)? If so, please explain.

d. What do you anticipate the impact of this project to be on you professionally or personally?

**Ensuring an Environment for Success**

3.Please describe how you have created an environment to successfully execute your grant:

a. Which specific organizational goals or program areas does this project support? Please answer in bullet form.

b. What do you need from your district/organization, building leader, department chair, and colleagues to support this project? Have you secured this?

**Budget and Timeline**

4.Please describe the budget and timeline for the project. Be sure to include:

a. Please provide the overall itemized budget for this project.

i. If there are multiple funding sources for this project, please identify the line items of the project that you are requesting from the GFFE.

ii. List in-kind donations or contributions from other sources, including personal contributions, along with value and source.

iii. Explain why you need funding, from outside your school/organization/etc.

b. What is the timeline for this project (key dates). Please take into account the GFFE grant funding process can take six weeks.

**Publicity**

5. If your grant is approved, how will you share information about the project and its results? Please note, it is expected that you will acknowledge GFFE as a funding source for your project.

Additional:

For GFFE publicity purposes, please summarize your grant in 100 to 150 words.

**Required Signatures**

Two signatures are required for every grant. For grants for Grades K-8, signatures required are the principal and a colleague. For grants for grades 9-12, signatures required are the principal and the department chair. For grants from non-school agencies, signatures required are the agency administrator and a colleague.

Yes, I have reviewed this proposal in its entirety and confirm it is consistent with the mission, vision and policies of the agency and the purchases are consistent with the agency’s standards.

Colleague or Department Chair

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal or Agency Administrator

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_