Ellensburg School District Education Foundation Grant Application

| | Date: |
|-----------------|----------------------------|
| Applicant Name: | |
| Position: | Building: |
| Work Phone: | Home Phone: |
| E-mail address: | |
| | Amount of Funds Requested: |

(Additional pages may be used as needed.)

Executive Summary: *Please provide a summary of the project.*

Statement of Need: *Describe the need(s) the project will address.*

Project Description: Describe the goal(s) and objective(s) of the project. What will be accomplished at the completion of the project? How is the project related to the district's strategic plan? To the extent possible, were students, teachers, and staff involved in planning the project, and will they be involved in developing and implementing the project?

Methods: *Include all activities that will occur to achieve objective(s). Provide a timeline.*

Measurable Outcomes: How will the project enhance education in your school and impact students? How many students will be impacted with this project? Will the impact be yearly? Include how the project will enhance building/district goals and the district's strategic plan.

Evaluation: *How will you determine and report project outcomes?*

Sustainability: How will you sustain this project without grant funding?

Resources: List resources currently available (e.g., material, personnel) to achieve objectives.

Budget: Supply a total cost breakdown of the project. What amount you are requesting from ESDEF and what will grant funds pay for as part of the overall project?

| | | Date: |
|------------------------------|--|--------------------------------|
| | Applicant Signature | |
| | | Date: |
| () | Technology Director Signature Required Signature for technology requests) | |
| | | Date: |
| Building Principal Signature | | |
| PO Box 464, Ellensburg, | | District Education Foundation, |
| Education Foundation Us | e: | |
| Date Application Receive | ed: | _ |
| Board Member assigned | to review: | _ |
| Date presented to the Boa | ard: | |
| | Approved Denied | |
| | Amount approved: Funding source: | |
| | ceived: Date | |
| | Date Date | |
| Photos Received: | Date | |

(Mini-Grant Program Application Form March 2017)