



CAPE MAY COUNTY SPECIAL SERVICES SCHOOL DISTRICT EDUCATION FOUNDATION

MINI-GRANT APPLICATION SCHOOL YEAR 2018-2019

PROGRAM GOAL: To strive for excellence and quality in the Cape May County Special Services School District.

PROGRAM OBJECTIVES: To encourage Cape May County Special Service School District's dedicated and competent educators to plan, implement and evaluate programs designed to meet more effectively the educational needs of our youth.

ELIGIBILITY: Cape May County Special Services School District Staff Members

WHAT IS FUNDABLE? Staff may apply for funding for an innovative project consistent with recognized priorities. The EDUCATION FOUNDATION feels very strongly that projects submitted for consideration *introduce a new, creative and interesting approach* to meeting a perceived need. Projects do not have to be big, or be submitted for the full amount of the grant. Sometimes small, simple ideas are appropriate!

WHAT IS NOT FUNDABLE? Equipment; Furniture; Recurring Yearly Projects

PRIORITY will be given to projects that:

- Are experiential in nature
- Demonstrate a new and innovative strategy to develop basic competencies
- Can be self-sustaining after the initial year or has a plan to be self-sustaining within 2 years
- Focus on Global Education- Connecting students to the world or Sustainability
- Promote social and emotional development
- Help talented students develop their unique interests in the arts, the sciences and the humanities
- Equip students with essential competencies for obtaining satisfying jobs and learn about career opportunities
- Involve the community in the achievement of the grant objectives
- The number of students served is sufficient

TIMELINE

Thursday, March 29, 2018	Applications available on district website
Tuesday, April 10, 2018	Letter due requesting BOE permission to apply for grant
Tuesday, April 17, 2018	BOE approves requests to apply
Wednesday, April 18, 2018	Grant Assistance Meeting at 2:30 pm
Friday, May 4, 2018	Applications submitted to immediate supervisor
Friday, May 11, 2018	Applications due in Superintendent's Office by 2:45 p.m.

APPLICATION PROCEDURE: An original and one copy of the application must be submitted by the due date. Only completed applications will be considered.

SELECTION PROCESS: Proposals are evaluated by the EDUCATION FOUNDATION Board of Directors, who will make the final selections. Only projects that meet the FOUNDATION'S criteria will be considered for grant awards. **Highest priority will be given to new and innovative projects with a global outlook and/or Sustainability Goals.**

ACCOUNTABILITY: Any member of the EDUCATION FOUNDATION Board of Directors may make an on-site visit to verify project implementation in accordance with the original application.

The grant recipient is expected to present Mini Grant at a Foundation Board meeting if requested.

Grant recipients from the 2017-2018 school year are expected to submit a final report summarizing the project's evaluation results by Thursday, May 17, 2018. **Recipients who did not complete a final report from the prior year will not be considered.**

CONTROL OF FUNDS: Grants may be funded up to \$1,000 per project. Grants may be partially funded up to a requested amount at the Foundation's discretion.

The control of funds granted to a teacher rests with the Cape May County Special Services School District Board of Education. The receiving board administers the funds and applies them only for the purposes for which they are granted. **Any changes in application of the funds will need a written justification and approval from the Superintendent.**

All funds granted are to be expended by Friday, May 10, 2019. Any deviation from this requirement needs to be requested in writing and approved by the Superintendent. It is expected that the grant will be implemented early enough in the school year so as to provide students with timely projects and programs.

The local school board keeps records and affords access thereto as the EDUCATION FOUNDATION may find necessary.

TIMELINE: As listed on page 1

EVALUATION: Describe the process by which the objectives will be evaluated (pre/post testing, portfolio, etc.)

Please Note: The number of grant awards will depend on the availability of funds, the alignment to the priorities, and the appropriateness of the proposals.

**CAPE MAY COUNTY SPECIAL SERVICES SCHOOL DISTRICT
EDUCATION FOUNDATION MINI-GRANT APPLICATION INSTRUCTIONS**

A. General Information (page 1)

This section provides the necessary identification information:

- Program (Autistic; Behavior; Preschool Disabilities; Multiple Disabilities; Severe/Cognitive; Vocational) - Age of students/Subject area to be addressed
- Person(s) applying for grant (If more than one list the “lead contact person”)
- School position(s)
- School assigned; principal's/supervisor's name and signature
- Phone number

B. Statement of Assurances (page 2)

To ensure that the proposal carries a high priority within the school and that the conditions of the grant are understood, a sign-off by the applicant, applicant's supervisor and principal(s) of school(s) in which project will occur.

C. Project Title and Description (page 2)

Title	Be as concise, descriptive and specific as possible.
Subject Area	Specify the curriculum area(s) to which the proposal applies.
Program	Autism; Behavior; Preschool Disabilities; Multiple Disabilities; Severe/Cognitive; Vocational
Number of Student Participants	The approximate number of students to be served by the proposal.
Age Level	Age level(s) of the students to be served by the proposal.
Start and End dates	When will the project start? When is the projected finish?
Need	What student need(s) will be met by your innovative project, keeping in mind district recognized priorities and goals.
Strategy	Summarize your proposal. A general description of how you anticipate implementing your plan to address the identified need(s).

D. Objectives, Activities and Evaluation Techniques (page 3)

Objectives	Describe the anticipated outcome(s) of your proposal. The outcome(s) should alleviate, reduce or eliminate the need(s).
Activities	The activities are the means by which the teacher and the students accomplish the objectives stated. This section is the essence of your innovative or creative idea.
Assessment	How will you measure if objective has been met?
Timeline	For each objective, designate the approximate completion month for the activities indicated. The timeline listed should be adhered to unless there is a modification request to the Superintendent.

E. Itemized Budget: The budget requested should reflect the actual needs of the project with a maximum of \$1,000 per proposal. Compensation to the teacher for carrying out the project during the duration of the grant is **not** an allowable expenditure.

**CAPE MAY COUNTY SPECIAL SERVICES SCHOOL DISTRICT
EDUCATION FOUNDATION MINI-GRANT PROGRAM APPLICATION**

The **original and one copy** of the completed application must
be received in the Superintendent's Office by 2:45 p.m. on
Friday, May 11, 2018

A. General Information

Applicant(s): _____

Program/Age Level/Subject: _____

School/Department: _____ Phone Extension: _____

Principal/Director: _____

B. Statement of Assurances

The applicant(s) hereby assures the EDUCATION FOUNDATION that:

1. The applicant(s) meet the eligibility criteria.
2. The activities and services for which the grant is sought will be implemented as written.
3. Any funds received under this grant program shall not be used to supplant funds normally budgeted by the school district for similar services and materials.
4. Any monies not expended by June 30th after receipt of a grant award shall revert back to the EDUCATION FOUNDATION unless permission to carry it into the next school year is granted.
5. All publicity releases regarding a funded project will acknowledge the EDUCATION FOUNDATION as the funding agency.
6. The grant recipient will submit a final report summarizing the project's evaluation results by June 7, 2019.
7. The grant recipient agrees to present to the Education Foundation in person if requested
8. Application has been made to and authority received from the CMCSSSD Board of Education for permission to apply.

I (We) do hereby certify that all of the facts, figures and representations made in this application are true and correct to the best of my (our) knowledge and that the assurances as stated above are understood and will be followed in their entirety.

Date

Applicant Signature(s)*

Date

Principal/Supervisor's Signature

Date

Principal(s) in building in which project will take place

Date

Superintendent's Signature

Please print name of Name of Lead Applicant (Contact Person)

***Additional applicants must sign on reverse of this page - Additional pages may be attached to the application form, if needed.**

D. Objectives, Activities and Evaluation Techniques

Objectives	Activities & Timeline to Accomplish Objectives	Completion Date	Evaluation Techniques (Measurement)

E. Itemized Budget

Materials/Equipment		Services		Other	
Item(s)	Cost	Item(s)	Cost	Item(s)	Cost