

Date Grant Received _____

Application # _____

**Bucks County Schools Intermediate Unit
Education Foundation
Grant Application
2007/2008 School Year**

Applicant(s): _____ Date: _____

Program: _____ Supervisor: _____

School: _____ Work Phone: _____

School District: _____ Voice Mail #: _____

E-Mail Address: _____

Home Address: _____ Home Phone: _____

City, State, Zip Code: _____

**THE (FOLLOWING) INFORMATION BELOW IS TO BE COMPLETED BY THE SUPERVISOR
OF THE GRANT APPLICANT**

Applicant **MUST** first seek funding for their grant proposals through their program supervisor.

____ Funds for this project are not currently available through my program budget.

____ My program budget can contribute \$ ____ toward the implementation of this project.

SUPERVISOR'S COMMENTS: _____

SUPERVISOR'S SIGNATURE (required): _____

PROJECT TITLE: _____

AMOUNT REQUESTED: _____
(maximum grant amount = \$1,000)

Please use ONE additional sheet of paper to describe the proposed project in 500 words or less. List expected outcomes, target population and budget requirements. Be specific with regard to field trips, books, audiovisual equipment, software, resource person(s), etc. Remember that the intent of these grants is to provide opportunities for educators to expand educational opportunities beyond the typical curriculum.

***Use a separate sheet to provide project information.
Your proposal MUST include
all of the following information (a through e):***

- a) Project Rationale: Explain reason(s) for the project and approximate number of students involved.
- b) Expected Outcomes: Include a bulleted list of project goals.
- c) Project Description: Sequentially list and briefly describe the activities planned for your project (please limit to 250 words).
- d) Budget: Describe expenditures that would be incurred for your project.
- e) **Signature of Supervisor**

The Education Foundation is committed to providing funds for innovative projects that:

- *reflect best teaching practices*
- *display creativity*
- *encourage participation with parents and the community*
- *provide opportunities not typically available to the students (trips, shows and speakers)*
- *promote interaction between district and IU classes*
- *inspire students to increase their interests in a topic*
- *demonstrate novel use of materials beyond the curriculum*
- *request technology to enhance the delivery of instruction for a specific objective*
- *sharing of items or knowledge within or between departments*

***I UNDERSTAND THAT ALL ITEMS PURCHASED WITH GRANT MONEY ARE
THE PROPERTY OF THE BUCKS COUNTY INTERMEDIATE UNIT***

SIGNATURE _____

***Return this form and your Grant Description to:
JoAnn Perotti, Education Foundation Executive Director
Bucks County Schools Intermediate Unit Education Foundation
705 North Shady Retreat Road
Doylestown, PA 18901
Telephone: 215-348-2940 extensions 1111 or 1120
Fax: 215-489-7874
jperotti@bucksiu.org***