



Grosse Ile Educational Foundation, Inc.

P.O. Box 34 | Grosse Ile | Michigan | 48138
www.gieducationalfoundation.org

These grant pages are for preview only. Use links to apply online.

School Based Grant Application

A. General Information

Name _____ Date _____

School: _____

Phone: _____ Email: _____

Have you received other grants from the GIEF? Yes _____ No _____
If yes, please describe.

If your project is complete, did you submit a Grant Performance Report? Yes _____ No _____

B. Grant Proposal

Type of Grant: Great Ideas Mini-Grant (\$500 - \$2000, due the 15th of the month during school year)
 Foundation Grant (over \$2000, due by October 15 or February 15)

Title or Topic of Grant: _____

Amount Requested: _____

Grade Level(s) and Subject Area(s) _____

Number of students involved _____

Number of teachers and/or staff involved _____

Indicate the timeline and anticipated date for completion.

Please provide a detailed description of your project or program.

- Include:
- a) the objectives of your project
 - b) how it will directly impact students
 - c) how this project will enhance your classroom instruction

How will you evaluate the effectiveness of your project? Describe how you will know if your project was successful as a result of the grant funding.

Describe how the mission of the Grosse Ile Educational Foundation will be advanced if you are granted monies.

Provide other information not requested that you feel would promote a better understanding of your proposal.

If the grant is awarded, describe how you would recognize the Grosse Ile Educational Foundation

C. Proposed Grant Budget

Provide an itemized budget matching the grant amount requested. Attach the price quotation or appropriate documentation of costs. Include vendor information, items, quantities, shipping and handling, materials, supplies, software &c.

Have you asked other sources for funds? Yes ___ No ___

List the source and dollar amounts pledged. (PTO/PAT, building funds, community organizations)

D. Applicant Declaration

I have carefully read and understand the criteria for this program as described in GIEF Grant Application, Grant Contract, and Grant Performance Report. If approved, I accept the conditions of the program and will return a portion or all of the funding if the program is not carried out as described in the application. I also agree that a completed Grant Performance Review must be submitted within 30 days of completion of the program. An oral report may be requested by the Board of Directors.

Name and qualifications of person(s) directing project:

Signature of Requestor: _____

(Print) Name of Requestor: _____

Qualifications: _____

Date: _____

Acknowledgement or Approval

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| <p><i>Great Ideas Mini-Grant (due by the 15th of the month during school year)</i></p> <p>Building Principal: _____</p> <p>Acknowledgement Date: _____</p> |
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| <p><i>Foundation Grants (due by October 15 or February 15)</i></p> <p>Building Principal: _____</p> <p>Approval Date: _____</p> <p>Superintendent: _____</p> <p>Approval Date: _____</p> |
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Thank you for your commitment going above and beyond for our Grosse Ile students!

