

Project Name: _____ Application Number: _____

Gerstacker Teacher Innovator Grant Program for Midland County 2016 - 2017

APPLICATION FORM

(Save to your computer. Type or use black pen, print clearly)

SUBMIT TO: Midland County ESA
Attn: Christine Schaefer
3917 Jefferson Ave.
Midland, MI 48640

BY: November, 11, 2016

PROJECT TITLE: _____

AMOUNT REQUESTED: _____ (Maximum Request: \$5,000)

Primary Applicant's Name: _____

Street: _____ **City:** _____ **Zip:** _____

School: _____ **Position/Title:** _____

Email Address (Required): _____

Phone Number (Required): _____ **Extension:** _____

Additional Applicants:

Applicant #2 Name: _____ **School:** _____

Applicant #3 Name: _____ **School:** _____

I (We) grant to the Midland County ESA the right to use this proposal, and if funded, the results of this project for public information purposes or to share with other educators.

HANDWRITTEN SIGNATURES REQUIRED BELOW

Primary Applicant: _____ **Date:** _____

Applicant #2: _____ **Date:** _____

Applicant #3: _____ **Date:** _____

Principal's Signature: _____ **Date:** _____

Project Name: _____ Application Number: _____

DIRECTIONS:

From this point forward **DO NOT** mention the name of the school district, building, applicant’s name, or special programs in the project abstract or any other sections of this application.

Note: The project title will appear at the top of every page of this application. Please verify that your project title does not include any references to the school district, building, applicant’s name, or special programs.

PROJECT ABSTRACT

In **150 words** or less *summarize your project*. The purpose of this abstract is to provide a “stand-alone” description to explain the nature of your project to the Gerstacker Foundation. You will have the opportunity to include more details on the following pages.

Total Budget Request (this is an auto-calculated field based on the itemized list from page 4): _____

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PROJECT APPLICATION

A. NEED

In 100 words or less, what student-focused need does the proposed project address?

B. STUDENT IMPACT

Approximately how many students and what grade levels will be involved in this project?

Student Number: _____

Grade Level: _____

C. PROJECT GOALS

In 100 words or less, what are the goals of the project and desired student result?

D. PROJECT IMPLEMENTATION

In 100 words or less, explain how this project will be implemented.

E. EVALUATION

In 100 words or less, how will you determine if this project has achieved the desired results?

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F. PROJECT COMPLETION

In 100 words or less, what will happen to the project at the conclusion of the grant? If it is to continue, how will it be funded?

G. HISTORY

Has this project been implemented in the past? If so, describe how the project was funded and the results. Attach additional pages if needed.

___ NO

___ YES: If yes, explain below:

H. BUDGET REQUEST

- Detail your budget request (please be specific). Compare pricing using more than one source, for example: www.cdwg.com. List the lowest cost estimate for your purchase under items.
- Submit copies of your estimates with your grant.
- Organize the budget items according to project activities.
- Include kinds of materials and equipment needed and stipends to be paid.
- Innovator grants are awarded directly to teachers, not your school districts.
- Budget amounts cannot be increased after the grant is awarded

Item

Budget Amount

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL GERSTACKER GRANT REQUEST:

Project Name: _____ Application Number: _____

I. OTHER CONTRIBUTIONS

If you will be using additional materials, labor or dollars for this project that you have not listed above, (i.e., in-kind donations, volunteer labor, other grants, school funds), please describe.

<u>Item</u>	<u>Budget Amount</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
<u>TOTAL OTHER CONTRIBUTIONS:</u>	_____

If needed, please attach additional pages to support your grant request.

Suggested Attachments:

- 1) Estimates for requested purchases.
- 2) Research or other supporting material.
- 3) If requesting books, provide a complete purchase list that includes the book title, author, and cost.
- 4) Any other details of your grant request that was not covered in the previous application section.

DOUBLE CHECK YOUR APPLICATION to ensure there is no mention of the school district, building, applicant's name, or special programs past the title page.