Grant Application

# Instructions:

* Avon Education Foundation funds projects from $500 up to $1,250.
* Make a copy of this document, under File - Make a Copy.
* Complete this form by filling in each applicable field.
* The approved application should be submitted via email.
* Submit one (1) electronic copy (PDF file only) to [GrantChair@avonedfoundation.org](mailto:GrantChair@avonedfoundation.org)
* The file should contain electronic signatures or a scanned image of the signed cover sheet and any relevant attachments.
* Please refer to the AEF website for additional information at <https://www.avonedfoundation.org/>

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| Need more information?  Contact Cindy Pastore or Deb Searson, Grant Chairs, via email at  [GrantChair@avonedfoundation.org](mailto:GrantChair@avonedfoundation.org) |

**Guidance from Grant Chair(s)**

1. Discuss your idea with your administrator/principal early in the application process.
2. The grant application must be completed by an employee of the Avon Public Schools, Avon Free Public Library, or Avon Senior Center. Grants submitted by students/volunteers cannot be accepted.
3. Grant applications must be submitted by posted deadlines.
4. Read the Grant Application Evaluation Form to acquaint yourself with the criteria used to review each proposal.
5. Prior to submitting an application, the grant applicant must obtain approvals as indicated on the application. It is recommended that applicants know of any required timing within their respective organizations for receiving final approvals in advance of the posted deadline.
6. All grant recipients will be asked to complete a Final Report form upon the completion of their project.

Grant Application

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| **COVER SHEET SECTION 1 - CONTACT INFORMATION** | |
| Project Director and Position |  |
| Additional Applicant Names |  |
| School/Municipal Department |  |
| Telephone Number for Project Director |  |
| Email for Project Director |  |

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| **COVER SHEET SECTION 2 - GRANT OVERVIEW** | |
| Project Title |  |
| Total Grant Request Amount |  |
| Number of Students /Residents Affected |  |
| Grade Level of Affected Students |  |

Grant Application

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| **COVER SHEET SECTION 3 - SIGNATURES** |
| By signing below, the signees hereby (a) agree to complete a post-project evaluation at the request of the Foundation, (b) grant to the Foundation the right to publish the grant proposal and results of the project if funded, (c) understand grant awards are subject to the rules and conditions of the Foundation, and (d) accept that the decision on acceptance of the project is in the sole and absolute discretion of the Foundation. AEF accepts each application with the understanding that the grant activity is consistent with the goals and mission of the school/municipal department, and complies with each respective organization ́s other employment, environmental and safety requirements. |

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| Project Director Signature | Project Director Printed Name | Date (mm-dd-YY) |
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| Principal/Municipal Head Signature For School and Town Department Applications | Principal Municipal Head Printed Name | Date (mm-dd-YY) |
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| Superintendent (or Designee) Signature For School Applications only | Superintendent (or Designee) Name | Date (mm-dd-YY) |
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Grant Application

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| **GRANT APPLICATION SECTION 1 - PROJECT SUMMARY** | |
| **OVERVIEW**  In a few sentences, briefly explain your project. |  |
| **SUBJECT AREA** |  |
| **MOTIVATION**  What prompted the interest/need for this project? |  |
| **INNOVATION**  How is this project innovative or creative? |  |
| **COLLABORATION**  Who must collaborate for this program to be successful? |  |
| **CURRICULUM**  How does this project enhance the current curriculum? |  |
| **NEED**  Explain the need for the funds being requested |  |

Grant Application

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| **GRANT APPLICATION SECTION 2 - PROJECT OBJECTIVES** | |
| **OBJECTIVES**  List specifically what your project will accomplish. |  |
| **MEASUREMENT**  How will you measure successful achievement of the listed objectives? |  |

Grant Application

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| **GRANT APPLICATION SECTION 3 - PROJECT IMPLEMENTATION** | |
| **PLAN OF ACTION**  Explain how you will conduct the project. |  |
| **TIMELINE**  Provide a timeline of events for the project. If the project must be conducted during a specific time period of the academic year, please indicate which weeks or months. |  |

Grant Application

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| **GRANT APPLICATION SECTION 4 - FUNDING**  Please attach all supporting details, current pricing, catalogs, etc. | |
| **SUPPLIES/MATERIALS** |  |
| **EQUIPMENT** |  |
| **STORAGE/SECURITY FOR EQUIPMENT** |  |
| **SHIPPING/HANDLING FEES** |  |
| **TOTAL AMOUNT REQUESTED** | $ |
| If other funds may be available to pay for this project, describe your efforts to obtain these funds |  |
| Describe, if applicable, any additional funding this project will require beyond the grant period to achieve sustainability |  |

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| **Extra Space for Additional Information** | |
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