

# FOUNTAIN VALLEY EDUCATIONAL FOUNDATION

## GRANT COVER PAGE

NAME OF APPLICANT \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

SCHOOL/DEPARTMENT \_\_\_\_\_

**TYPE OF GRANT:**

\_\_\_\_\_ SINGLE CLASSROOM \_\_\_\_\_ MULTIPLE CLASSROOMS/GRADES \_\_\_\_\_ ENTIRE SCHOOL  
\_\_\_\_\_ GRADE LEVEL \_\_\_\_\_ GRADE LEVEL(S) \_\_\_\_\_ GRADE LEVELS  
(UP TO \$300) (UP TO \$750) (UP TO \$1,000)

**CURRICULUM AREA and CA STATE CONTENT STANDARDS ADDRESSED**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you be willing to provide a video, and/or pictures of your grant in action and a short synopsis (1 paragraph) to the FVEF to promote fundraising for additional grants to be given? Yes \_\_\_\_\_ No \_\_\_\_\_

APPROVAL OF IMMEDIATE SUPERVISOR \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_

(As an Assurance Statement)

REVIEWING CODE \_\_\_\_\_

Office use only

# FOUNTAIN VALLEY EDUCATIONAL FOUNDATION

## GRANT APPLICATION 2012-2013

Submit 10 copies of this application to the Superintendent's Office.  
Deadline: February 1, 2012

### Reminder:

Do not use the name of a particular school, principal, or teacher.

1. Briefly describe the activities of the grant. \_\_\_\_\_

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2. Will this grant involve a:

\_\_\_\_\_ SINGLE CLASSROOM \_\_\_\_\_ MULTIPLE CLASSROOMS/GRADES \_\_\_\_\_ ENTIRE SCHOOL  
\_\_\_\_\_ GRADE LEVEL \_\_\_\_\_ GRADE LEVEL(S) \_\_\_\_\_ GRADE LEVELS  
(UP TO \$300) (UP TO \$750) (UP TO \$1,000)

3. When will the program begin and end? \_\_\_\_\_

4. Amount requested \_\_\_\_\_ Will you accept partial funding? \_\_\_\_\_

5. Indicate the subject area:

\_\_\_\_\_ English/Language \_\_\_\_\_ Mathematics \_\_\_\_\_ Science \_\_\_\_\_ Social Studies/History  
\_\_\_\_\_ Physical Education \_\_\_\_\_ Performing Arts \_\_\_\_\_ Visual Arts \_\_\_\_\_ Technology

6. What California State Content Standards will be taught? Please be specific. \_\_\_\_\_

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7. Will there be a continuing impact on children? If so, describe.

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8. How will you share the outcome of this grant with others in the District? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Other comments or unique aspects of this grant. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Give a specific list, and/or a description of needs, and/or materials required to successfully complete the proposed project, a one page itemized propose budget must be attached. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Remember: For your grant to be considered, you must submit:**

- 1 copy of the cover page
- 10 copies of each page of the grant application form, including a proposed budget page
- For technology grants, please continue with questions #11-20 on the next page.

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**Technology Guidelines (to be completed when requesting technology grants)**

Are you writing this grant for technology hardware? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, briefly describe the hardware while considering the following questions:  
Does it have an Operating System (OS)? If yes, is it Microsoft Windows based, Macintosh OS, mobile device Apple iOS, Droid, or other?  
If it is a mobile device, what are the required wireless connections?

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Does your grant proposal involve software? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, continue with questions 11 through 14

11. What type of computer will be used to load the software? \_\_\_\_\_

12. What operating system do you have:

Mac or PC? *Circle one.* What version? \_\_\_\_\_

What operating system does this software require:

Mac or PC? *Circle one.* What version? \_\_\_\_\_

13. How much memory is required for the software? \_\_\_\_\_

Does your machine meet this specification? Yes\_\_\_\_\_ No\_\_\_\_\_

14. How many computers will the software be loaded on at any one time? \_\_\_\_\_

15. If your grant involves a commercial web site, please give the web address.

\_\_\_\_\_

16. If the grant involves an online subscription for a service, how many months of service will the grant cover? \_\_\_\_\_

17. If the grant involves peripheral equipment, does the grant include this purchase?

\_\_\_\_\_

18. If no, do you have the equipment necessary to operate the software/hardware being requested?

\_\_\_\_\_

19. Will professional equipment installation be required? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, does the grant include these costs? Yes\_\_\_\_\_ No\_\_\_\_\_

**20. Is any formal training required to use this technology?    Yes\_\_\_\_\_ No\_\_\_\_\_**  
**If yes, does the grant include these costs?    Yes\_\_\_\_\_ No\_\_\_\_\_**