

North Hunterdon Education Foundation (NHEF) - GRANT PROPOSAL

BASIC INFORMATION

Project Title: _____

Name of Project Champion/Lead Teacher: _____

Champion e-mail: _____ Champion Phone #: _____

Class Subject(s): _____

Department(s): _____

Grade Level(s): _____

Estimated Number of Participating Students: _____

Total Dollar Amount Requested: _____

Is this a team proposal? Yes No *(If yes, list team members below.)*

Have funds for this grant proposal been previously requested from the school and/or district budget? Yes No
(If yes, please indicate when and outcome below.)

Is there additional funding available from other resources? Yes No
(Please explain as to what other resources for funding you investigated beyond the school budget and with what results.)

Applicant Name (print): _____

Applicant Signature: _____ Date: _____

APPROVALS

Assistant Principal Signature (dept. support): _____ Date: _____

Principal Signature: _____ Date: _____

Superintendent Signature: _____ Date: _____

District Director of IT Signature: _____ Date: _____
(Needed only if grant includes a technology component)

Please fill out each section with as much detail as you are able. Please consider that your proposal will be evaluated by NHEF against the Grant Evaluation Rubric. Attach extra pages as necessary.

1. Project Description: Introduction of project.

Describe the project you would like to pursue and explain what need(s) the project addresses. Explain how it aligns and supports the NHEF mission.

2. Student Impact: Identify number of students/staff who will benefit from this project.

Identify both the short term (school year implementing) and long term (beyond current school year) impact for the students and staff. (Is it multi-grade / subject or maybe more limited in scope? Growing population over multiple years?)

3. Goals and Objectives (G&O): Identify specific need or problem being addressed and targeted outcome(s) of new learning opportunity.

State the project's major educational learning objective(s), how it addresses the stated need(s) and what the expected outcome(s) will be for this project. (Will this project enhance the curriculum and quality of learning? Can outcomes be expanded for impact to students after high school?)

4. Implementation: Identify execution plan for full project benefit.

Outline the implementation plan including goals, activities and targeted completion dates for your project. (How can you ensure the maximum potential of the grant is reached?)

For Office Use: Grant Application # _____

For any questions regarding the Grant Program or the application process, please contact the NHEF at nhef@nhhsfoundation.org or Dina Marron at dmarron@nhvweb.net.

Submit to: North Hunterdon Education Foundation
via email: nhef@nhhsfoundation.org

For NHEF Use Only:

Date _____

Approval Status: _____ Full; _____ Partial; _____ Conditional; _____ Deferred; _____ Not Approved

Further action requested:

Mailing address:
North Hunterdon Education Foundation
PO Box 488
Annandale, N.J. 08801