



STARKVILLE FOUNDATION FOR PUBLIC EDUCATION

GRANT APPLICATION

Date: \_\_\_\_\_

Title of Project: \_\_\_\_\_

Check One: Classroom Grant \_\_\_\_\_ General Grant \_\_\_\_\_ GO PLAY Grant \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone: \_\_\_\_\_

School: \_\_\_\_\_ Grade level(s): \_\_\_\_\_ (IF APPLICABLE)

Brief project description:

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

Attach a detailed project description. On a separate sheet submit an itemized budget. (Be sure to justify the requested items in your budget). In your project description include the significance of and need for the program, objectives and purposes, and methodology or means of accomplishing objectives. Explain how the effectiveness of the project will be judged at the end. Your proposal will be judged on impact, innovation, appropriateness, evaluation method, and budget justification. If you are submitting a classroom grant, please include a short biographical sketch.

Please Note: \*\* SUBMIT 12 COMPLETE COPIES OF THE WHOLE PROPOSAL \*\*

Amount requested: \_\_\_\_\_ (Max: \$1750 for general, \$750 for classroom, \$250 for Go Play Outdoor Curriculum Grant). Attach detailed budget.

Beginning date: \_\_\_\_\_ Completion date: \_\_\_\_\_ No. of students to be affected: \_\_\_\_\_

Who will fund this project if the Foundation does not? \_\_\_\_\_

Will this project be implemented if the Foundation does not fund it? No OR Yes, when? \_\_\_\_\_

Principal or other school official's approval:

\_\_\_\_\_
Name

\_\_\_\_\_
Signature

Submitted by:

\_\_\_\_\_
Name

\_\_\_\_\_
Signature

SFPE Committee Checklist

- Application Form
Detailed Project Description
Itemized Budget
Biographical Sketch

Starkville Foundation For Public Education

P.O. Box 2307
Starkville, MS 39760

www.starkvillefoundation.org