



CRITICAL NEEDS (EMERGENCY) GRANT APPLICATION GUIDELINES

The Foundation's purpose is to enrich the education of all students within Alba-Golden ISD by providing needs-based additional resources, outside the scope of regular school budgets. The Education Foundation believes several factors can influence a student's ability to learn and will deliberate on all applications.

Completed applications should be submitted via email to grantapplications@agisdef.org

Applications must be received **at least fourteen working days** prior to the Education Foundation Board of Directors' Meeting, which is the third Monday of each month. There is no guarantee that the Grant Application will be on the agenda for that month's meeting date if received later than the deadline. Emergency Grants will be expedited on a case-by-case basis.

For school-related trips, please note:

- Schools and parents typically cover costs of school-related trips that provide enrichment opportunities. The AGISDEF can only assist those students who may not be able to afford these trips.
- The amount covered by schools must be included on the form.
- All Clubs are expected to fundraise for trips to offset costs; this amount must also be included.
- Plan to attend the meeting when your application is being considered to answer questions by AGISDEF Directors.
- All students' personal information is redacted before application is submitted to the AGISDEF Directors.

Once an application is received, it will be reviewed by the Board of Directors and applicants will be notified about the status of their request within 30 days of each request. If additional information is needed, the staff will be contacted, and the required information should be submitted as soon as possible. A delay in submission of the information could result in a delay in final review of the grant request.

CRITICAL NEEDS EMERGENCY GRANT APPLICATION

Staff member applying on behalf of student:	
Name of student:	
Staff Phone:	Staff Email:
Description of what critical needs are being met with this grant.	
How much are you requesting?	
Total cost of items needed:	
Will this be a recurring need?	
Approximate date needed:	
Are supporting or matching funds being requested from other sources? YES NO List details below:	
Description/Name of organization	Amount received or committed
1. District Contribution	
2. Club/Activity	Via Fundraising
3. Family contribution	
4. Other organization	
5. Other organization	
<p>If this grant application is approved, I understand that the Education Foundation may ask for a written report upon completion of the event/project/trip/etc. or anytime thereafter. The inability to provide a report may jeopardize my applications in the future. I also agree that the Foundation may publish all or part of this report on their website or newsletter (all personal information is removed to maintain the recipient's confidentiality. Photos are published with permission). Recipients may be asked to attend a Foundation meeting upon completion and present a personal report on how they benefited from the grant.</p>	
Applicant's signature:	Date:



AGISD Education Foundation
 PO Box 97, Alba, TX 75410
 903.474.1786
www.agisdef.org