



## **Opportunity and Strategy Granting Program**

### **Guidelines for Grant Applications**

#### **Purpose:**

**The Foundation's purpose is to enrich the education of all students within Alba-Golden ISD by providing need-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.** The Granting Program is designed to encourage, facilitate, recognize and reward innovative and creative instructional approaches to the accomplishment of program objectives. The Alba-Golden ISD Educational Foundation (AGISDEF) is offering employees the opportunity to apply for grants to support innovative programs or projects to enhance learning. The grants must align with the campus, department or district vision, improvement plans, or strategic plans.

#### **Persons Eligible to Apply for Grants:**

All employees of the Alba-Golden School District are eligible to apply.

#### **Eligible Proposals:**

Instructional approaches or projects designed to begin during the fall of each school year. Grants are supplemental and above and beyond what is funded traditionally by tax revenue. Grants should be complete, easy to understand the projected outcomes and submitted prior to the spring deadline.

#### **Award of Funds:**

Grants of up to \$1,000 will be awarded to individual initiated programs or projects. Grants of up to \$5,000 will be awarded to campus teams and departments. The number of awards will

depend on funds available from AGISDEF.

**Selection Criteria:**

- The degree to which the grant supports the district goals and the Campus Improvement Plan and is aligned with the vision of the school system.
- The degree to which the grant proposal represents a creative or innovative approach to accomplish objectives. Funds are not typically available for recurring programs/projects. (The proposal should address a new project as opposed to one accomplished or under way.)
- The degree to which a student's academic performance is emphasized.
- The degree to which the proposal is clear and logical, including (a) specificity of objectives; (b) clarity of description of instructional procedures, methods, or treatments; and (c) correspondence among evaluative procedures, objectives and treatments.
- The degree to which measurable objectives are incorporated in the proposal.

**Only page 2 & 3 of the Grant Application should be submitted to the AGISDEF electronically.**

*Email application as an attachment to [agisdef@gmail.com](mailto:agisdef@gmail.com)*

**Selection Process:**

1. Application forms may be obtained online through the web page at [www.agisdef.org](http://www.agisdef.org).
2. Applications must be reviewed by campus leadership for congruence with campus programs and signed by the principal, for applicants employed at a campus.
3. Signed applications are due to the AGISDEF office, no later than the date selected by the AGISDEF Board of Directors.
4. Applications will be reviewed and commented on by the Grant Review Committee and may include the following: members:
  - a. At least 2 AGISDEF directors appointed by the AGISDEF President
  - b. Superintendent or their designated admin appointee
  - c. Two members of the district who are now retired.
  - d. Parent representative appointed by the AGISDEF.
  - e. Others as determined by the AGISDEF Board of Directors
5. If recommended for approval, the application will be presented to the Board of Directors of AGISDEF in summary form for review and formal approval.
6. If approved by the AGISDEF Board of Directors, the application is collectively presented to the Alba-Golden School Board for formal acceptance of the grant funds.
7. Applicants will be notified of the grant status by the committee or Director.

**Responsibilities of Grant Recipients:**

- Use the awards for the purposes intended.
- Funds must be expended by the end of the school year intended for the project.
- Project must be fully implemented, and final report submitted to AGISDEF before recipients can apply for another grant.
- Recipients agree to share successful procedures with the district.

**When applying for a grant, please remember the following:**

- Grants are to be used to fund projects that are not provided for in the school and

- district budgets.
- Objectives and outcomes should be consistent with the goals of your school and the district.
- When creating your budget, research carefully and be realistic. Small grants are just as likely to be awarded as large grants. Partial funding will be considered. Funds will not be awarded for budgeted items available from district resources.
- **Grant Applications should be submitted to AGISDEF electronically via email to [agisdef@gmail.com](mailto:agisdef@gmail.com).** *A hard copy with the original signatures on the cover sheet must be forwarded to the AGISDEF office.*

### Tips for a Successful Application

#### **Need Statement:**

- Describe the area of student achievement you wish to address and give any data that supports the need. Please include how this grant addresses district and campus goals.
- Keep the statement simple and straightforward.
- Show how the project is innovative.

#### **Objectives:**

- Limit the number of objectives.
- Imply or state evaluation in the statement of objectives.
- Be specific.

#### **Description of Proposed Project/Activity:**

- Describe the problem or issue addressed.
- Show how the project supports the purpose.
- List steps to be followed in project implementation.
- Relate project to need and objectives.
- Be specific.

#### **Evaluation:**

- Relate to stated objectives.
- Indicate how you will know whether the project was successful.

#### **Partners:**

- Are there others who will participate in this project?
- What will their roles be?

#### **For school-related trips, please note:**

- Schools and parents typically cover the 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 60 - 90 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 the submission of the information could result in a delay in final review of the grant request.

After electronic submission, **please print off the application cover page and Grant application and submit a hard copy** to the **AGISD Education Foundation, 1373 cr 2377 Alba, TX 75410** or drop it off in a sealed envelope at the district administrative office with the following clearly written on the outside of the envelope:

**ATTN: Dr. Shelby Davidson, Superintendent &  
AGISD Education Foundation Grant Committee**

**Granting Program Application Cover Page**

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

Name of Applicant(s)

Signature of Applicant(s)


Subject(s) \_\_\_\_\_

Number of Students \_\_\_\_\_

Amount of Grant requested \$ \_\_\_\_\_

Primary target population to be served:

\_\_\_ students (target group:

\_\_\_ parents

\_\_\_ teachers

\_\_\_ administrators

School(s) \_\_\_\_\_

Grade(s) \_\_\_\_\_

other (please explain)

Implementation dates: \_\_\_\_\_

Signature of Principal \_\_\_\_\_ Date: \_\_\_\_\_ Signature

*\* Required when funds will be used to purchase technology and/or media equipment.*

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Abstract (no more than 100 words)

*(This page will not be seen by the Review Committee)*

## Granting Program Application

**Project Title:** \_\_\_\_\_

Grade(s) \_\_\_\_\_ Subject(s) \_\_\_\_\_ Number of Students \_\_\_\_\_  
(List each grade level)

CHECK ONE: This project is:

new to the district     new to my campus     new to me.

CHECK ONE: Have you received funds for this project from AGISD previously?

Yes     No

DIRECTIONS: Please provide a summary for each area listed below.

**Need:** (Describe the area of student achievement you wish to address and give any data that supports the need. Please include how this grant addresses district and campus goals.)

**Objectives:** (State measurable objectives in terms of expected outcomes.)

**Description of Proposed Project/Activity:** (Describe what you want to do with the grant funds. List activities and timeline. How is it innovative?)

**Evaluation Strategy:** (Describe how you will know if your objectives are met. How will you share your program's successes with your peers?)

**Partners:** (Identify any school and/or community partners involved in the project and their respective roles.)

**Sustainability:** (If funded, how will you continue the program/project in the future? What will be the recurring costs? Can the project be scaled by the district if desired?)

DIRECTIONS: Note the budget distribution for each category. Be specific.

<b>Budget Items</b>	<b>Amount</b>	<b>Vendor if applicable</b>	<b>Budget Code Business Office</b>
Supplies/Equipment (please list)			
District Contribution			
Club/Activity			
How much was raised Via Fundraising			
Family contribution			
Other organizations amount donated.			
Contracted Services (list consultants)			
Other:			
<b>TOTAL</b>			

(This page will only be used by the Review Committee ONLY – please leave blank)

**AGISD Education Foundation**  
**Criteria for Grant Reviewer Scoring Matrix**

Application Number \_\_\_\_\_

Evaluator # \_\_\_\_\_

Project Title \_\_\_\_\_

*Please rank the effectiveness of each item with 3 being high and 1 being low. Circle the number that best describes each statement.*

**Please check the statement below that best describes how you would rank this application.**

- I would recommend funding this project.
- I would recommend partial funding. Amount? \$ \_\_\_\_\_
- I would recommend funding this project if there was extra money.
- I would not recommend funding this project.

Additional Comments (please use back if necessary)

Criteria				Weighted Amount	Weighted Total
The need is clearly stated. Supports districts and campus goals.	3	2	1	X 3	
Objectives are specifically stated and measurable.	3	2	1	X 2	
Activities/procedures specifically stated and relate to purpose and objectives. Innovation is apparent.	3	2	1	X 3	
Evaluation strategy is clearly stated and relevant to the objectives and student performance.	3	2	1	X 2	
Budget is complete, realistic, accurate and appropriate.	3	2	1	X 2	
Project includes participation and support of parents, community and/or business partners.	3	2	1	X 1	
<b>GRAND TOTAL</b>					





## 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 [agisdef@gmail.com](mailto:agisdef@gmail.com)

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:	
<b>Description/Name of organization</b>	<b>Amount received or committed</b>
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  
 1373 CR 2377  
 ALBA, TX 75410  
 (903)765-2472



## HELPING HANDS GRANT APPLICATION GUIDELINES

The Foundation's purpose is to ensure that the staff of the Alba-Golden ISD feels supported in times of critical needs, and will endeavor to provide needs-based additional resources for teachers and staff who find themselves in financial difficulty due to unforeseen circumstances. The Education Foundation believes several factors can influence a person's ability to do their job effectively when faced with the turmoil life can offer, and grants provided by this specified fund may be able to alleviate some of that financial stress. The AGISDEF will deliberate on all applications.

Completed applications should be submitted online at [AGISDEF@GMAIL.COM](mailto:AGISDEF@GMAIL.COM)

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.

- You may be asked to attend the meeting when your application is being considered to answer questions by AGISDEF Directors.
- Any sensitive personal information will be 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.

# HELPING HANDS GRANT APPLICATION

Campus and/or Staff Member affected:	
Name of applicant:	
Phone:	Email:
Description of critical need:	
How much are you requesting?	
Total cost of treatment/emergency needs/etc.:	
If applicable, number of individuals involved:	
Approximate completion date:	
Are supporting or matching funds being requested from other sources? YES NO List details below:	
<b>Description/Name of organization</b>	<b>Amount received or committed</b>
1. District Contribution if applicable (ie. sick days/vacation time):	
2. Is insurance available?	Amount insurance will cover if known:
3. Family contribution	
4. Church contribution	
5. Other organization contribution	
<p>If this grant application is approved, I understand that the Education Foundation may ask for a written report upon completion of the treatment/emergency needs/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:



ALBA-GOLDEN ISD EDUCATION FOUNDATION  
 1373 CR 2377  
 ALBA, TX 75410  
 agisdef@gmail.com  
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## MINI 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 a teachers ability to educate, and will deliberate on all applications.**

Completed applications should be submitted via email to [agisdef@gmail.com](mailto:agisdef@gmail.com)

Applications must be received on or before the deadline set by the AGISD Education Foundation for mini grants awarded in the fall and spring. There is a 60 day waiting period before grants will be approved and recipients will be notified by email after awards are granted.

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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 60 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.

# MINI GRANT APPLICATION

Campus and/or Organization	
Name of applicant:	
Phone:	Email:
Description of event/project/trip/etc.	
How much are you requesting?	
Total cost of program/trip/course/etc.:	
If applicable, number of students involved:	
Approximate completion date:	
Are supporting or matching funds being requested from other sources? YES NO List details below:	
<b>Description/Name of organization</b>	<b>Amount received or committed</b>
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:



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 ALBA, TX 75410  
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