

Grant/Funding Summary Form

Grant Title: _____ Funding Source: _____

Check one: Entitlement Competitive

Purpose of the Grant: (e.g. support professional development for staff; provide MCAS support for tenth graders; curriculum enhancement)

Population Served: (e.g., PreK-12 teachers; middle and high school students who have not passed MCAS)

Amount Funded: _____

Scope of Grant Activities: (e.g. hire a middle school math teacher; offer a three-credit course for teachers; provide after school tutoring for students; purchase materials for students and/or teachers)

Grant Fund Use: Please check all that apply.

- | | | |
|--|---|--|
| <input type="checkbox"/> salaries | <input type="checkbox"/> conference registrations | <input type="checkbox"/> stipends |
| <input type="checkbox"/> consultant fees | <input type="checkbox"/> photocopying | <input type="checkbox"/> other (please list) |
| <input type="checkbox"/> substitute teachers | <input type="checkbox"/> materials and supplies | |

Project Timeline:

Value Added to Attleboro's Educational Vision – The vision of the Attleboro Public Schools is to be the center of a community united around education, where all stakeholders value and participate in our collective success.

Fiscal Circumstances (if grant funding is eliminated)

Submitted by: _____ School: _____ Position: _____ Date: _____

Principal Signature: _____ Date: _____

Please submit this completed form and a copy of the complete grant application to the Business Office when you submit the grant proposal for funding.

Cross Reference:

- Policy DD: Funding Proposals and Applications