

**Judson ISD Education Foundation
2012 Teacher Innovative Grant Application
Deadline March 9, 2012 no later than 4PM
Submit (2) copies**

**In an effort, to have a blind review of this application, please do not place your name or any other applicant names anywhere on this form.
We strongly recommend using your employee identification number(s).**

Date of application: _____

Applicant Information

Applicant(s):
Employee ID#: _____ TEL: _____
Employee ID#: _____ TEL: _____
Employee ID# _____ TEL: _____
Campus: _____

Proposal Information

Name of proposal:

Purpose for which funds are requested:

How does this project fit into your Campus Improvement Plan? Please specify the overall goal of the project, which objectives will be met and how these objectives support the Campus Improvement Plan.

How did you assess the need for this project?

Describe the procedures and methods you will use to implement this project:

Area of curriculum addressed:

- Language Arts Mathematics Science Social Studies
 Arts Physical Ed. Career & Technology Citizenship
 Other _____

Number of **unduplicated** students served: _____

Grade(s) of those served: _____

Budget Information

Amount of funding requested: _____

Cost per student served: _____

Provide a detailed project budget:

Budget Item	JISD Code*	Vendor	Amount
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	*see below	*see below	

***Budget codes will be provided to you by JISD Accounting Department after the award of the grant to expedite the procurement process.**

**** Check approved vendor list on Purchasing Website.**

Evaluation Plan

How will this project be evaluated?

Who will conduct the evaluation? (i.e. staff, principal, community members, etc.)

How will the evaluation results be used and/or implemented?

After the first year, how will students benefit from this project?

Partners (Optional)

Identify all community partners involved in this project and their respective roles?

Partner: _____ Role: _____

Partner: _____ Role: _____

Partner: _____ Role: _____

Authorization (Signatures Required)

Applicant: _____ Date: _____

Principal: _____ Date: _____

Nancy Robinson signature: _____ Date: _____

**Submit to: Judson ISD Education Foundation
c/o Yvette Reyna, Executive Director
8012 Shin Oak Drive
Live Oak, TX 78233**