

Mansfield I.S.D. Education Foundation
May 3, 2010
“Building on Success”
2010-2011

Name of Lead Teacher(s)

School(s)

Grade(s)

Subject(s)

Project Title

Name of the Grant: (What past grant do you want to implement?)

Are you continuing an existing grant at the same campus? Yes No

If your answer is yes: Why do you want to continue the grant?

Amount of funds requested:

Purpose: (What do you want to buy and how will your students benefit by repeating, enhancing or adding to the grant?)

Rationale: (Importance and relevance to campus/district objectives)

Objectives: (What do you want to achieve?)

Description of Instructional Procedures, Methods or Activities Which Will be Utilized:

Number of students impacted (immediate and future):

Evaluation Procedures: (What criteria will you use to measure success?)

Identify any school-community partners involved in the project and their role(s)

If proposal is technology, special education, or ESL based, have you submitted your idea for approval to these departments?

Has other funding been sought for your proposal? (principal, PTA, instruction)

Date of Implementation:

What do you plan to do to promote the foundation after funding of your grant?

**Mansfield ISD Education Foundation
Grant Budget Instructions**

1. The MISD Grant Budget (page 3 of grant application) must include both the ***Function Code and Object Code*** for each budget item requested. Place both codes in the budget code column. The most commonly used function and object codes are provided below for your convenience:

2010-2011 **Function Codes:**

11	Instruction
12	Instructional Resources/Media Services (Library)
13	Curriculum Development & Instructional Staff Development
61	Community Services

2010-2011 **Object Codes:**

6112	Substitute Pay (allow \$74.00 per day to include salary & benefits)
6299	Contracted Services
6329	Reading & Reference Materials (magazine subscriptions, etc.)
6399	General Supplies (shelves, paper, manipulatives, art supplies, etc.)
6411	Teacher Travel (registration, travel, hotels, meals, etc.)
6645	Technology Equipment (capital outlay)
6412	Student Transportation
6649	Other Equipment (capital outlay)
6669	Library Books

2. The total budgeted amount must equal the grant request.
3. Note: The foundation will not provide funds for food items.

SIGNATURE PAGE

TITLE OF GRANT _____

CAMPUS _____

Please include the signature of lead teacher(s) only. Please add additional lines if needed.

Print Name

Signature

Print Name

Signature

Print Name

Signature

Print Name

Signature

Principal Signature