2025 MISD Education Foundation Grant Application

Please complete the information below in its entirety to complete the grant application.

Budget Page, click link to **make a copy** and complete all required areas. Please do not type on the page that loads. **You must make a copy of the form first.**

* Indicates required question

1. Email *

2. Primary Grant Applicant First Name *

3. Primary Grant Applicant Last Name *

4. Primary Grant Applicant Email Address *

   The email address on file will be the primary contact. The primary contact will be responsible for sharing all project information with other applicants on this project.

5. Other Applicant(s) Names

   Please list first and last names of all other applicants separated by commas.

6. Campus/Location *

Mark only one oval.

- Academy for Early Learners
- Anderson ES
- Boren ES
- Brockett ES
- Brown Academy
- Cabaniss Academy
- Daulton ES
- Davis ES
- Gideon ES
- Harmon ES
- Holt ES
- Jones ES
- Miller ES
- Morris ES
- Nash ES
- Neal ES
- Norwood ES
- Perry ES
- Ponder ES
- Reid Academy
- Sheppard ES
- Smith Academy
- Spencer ES
- Tarver-Rendon Academy
- Tipps Academy
- Cross Timbers IS
- Icenhower IS
- Lillard IS
- Low IS
- Martinez IS

- [ ] Orr IS
- [ ] Shepard Academy
- [ ] Jerry Knight STEM Academy
- [ ] Coble MS
- [ ] McKinzey MS
- [ ] Howard MS
- [ ] Jobe MS
- [ ] Jones MS
- [ ] Wester MS
- [ ] Worley MS
- [ ] Ben Barber Innovation Academy
- [ ] Early College HS
- [ ] Frontier STEM Academy/Frontier HS
- [ ] Lake Ridge HS
- [ ] Legacy HS
- [ ] Mansfield HS
- [ ] Phoenix Academy
- [ ] Summit HS
- [ ] Timberview HS
- [ ] Administration
- [ ] Curriculum Coordinators
- [ ] District Athletics
- [ ] District Fine Arts
- [ ] District Initiative
- [ ] District Wide

7. Grade Level *

If it applies to more than one grade level on your campus, please check all that apply.

If it is a district wide grade-level grant, please choose that option.

Check all that apply.

- [ ] Pre-K-12
- [ ] PreK
- [ ] Kindergarten
- [ ] 1
- [ ] 2
- [ ] 3
- [ ] 4
- [ ] 5
- [ ] 6
- [ ] 7
- [ ] 8
- [ ] 9
- [ ] 10
- [ ] 11
- [ ] 12
- [ ] District wide elementary schools
- [ ] District wide intermediate schools
- [ ] District wide middle schools
- [ ] District wide high schools
- [ ] All District
- [ ] Other: _____

8. Main Category *

Please choose one primary category (Note that grant will be reviewed and approved by the department/category)

Mark only one oval.

- Athletics
- CTE
- Dyslexia
- Emergent Bilinguals
- Fine Arts
- Health & Fitness
- Library Services
- Literacy (Reading & Writing)
- Math & Science
- STEM
- Social Studies
- Social/Emotional Health
- Special Education
- Technology

9. Supporting Categories *

Please select all that apply. Your application will be reviewed and approved by the appropriate department(s). If your request includes any technology or software, it must be pre-approved by the Technology Department.

Check all that apply.

- [ ] Athletics
- [ ] CTE
- [ ] Dyslexia
- [ ] Emergent Bilinguals
- [ ] Fine Arts
- [ ] Health & Fitness
- [ ] Library Services
- [ ] Literacy (Reading & Writing)
- [ ] Math & Science
- [ ] STEM
- [ ] Social Studies
- [ ] Social/Emotional Health
- [ ] Special Education
- [ ] Technology

10. Project Title *

_____

11. Total Amount Requested *

Please format your response as currency (1999.95). The total should include all fees and match the attached quote amount. Be sure to include S&H if it is required by the vendor.

_____

12. Grant Summary *

Please provide a brief (150 words or less) summary of your grant.

Grant Applications

The Mansfield ISD Education Foundation offers several different kinds of grants made available to MISD teachers and staff for grant funding.

Teacher Grant: Max per grant: $1,000 (one teacher or staff member applying for a grant)

Collaborative Grant: Max per grant: $5,000 (a grade level, team, campus or department collaborating to apply for a grant)

Think Big Grant: Max per grant $10,000 (district-wide grant impacting many. Example: a grant for all MISD Middle Schools or all Elementary 2nd graders)

Building on Success Grants are for teachers and educators to apply individually for a grant up to $1,000 or collaboratively for a grant up to $5,000, based on a previously funded and implemented grant.

13. What are the intended outcomes or goals you hope to accomplish with the funding from this grant? *

14. For which type grant are you applying? *

Please note in your Grant Summary if you are you applying for a building on success grant (expanding on a previously awarded grant) with the name of the previously awarded grant.

Dropdown

Mark only one oval.

- Teacher Grant: Max per grant: $1,000 (one teacher or staff member applying for a grant)
- Collaborative Grant: Max per grant: $5,000 (a grade level, team, campus or department collaborating to apply for a grant)
- District WIde Think Big Grant: Max per grant: $10,000 (Example: a grant for all MISD Middle Schools or all Elementary 2nd graders)
- Building on Success Grant: individually up to $1,000 or collaboratively up to $5,000.

Grant Details / Project Information

15. What specific purchases do you intend to make with the grant funding? *

Provide a brief overview of the items you wish to purchase Include the links to these items on the budget page.

16. How do you foresee this grant enhancing the experiences or opportunities for the students? *

17. What is the primary focus of your grant? *

Mark only one oval.

- ◯ Academic
- ◯ College/Career Ready
- ◯ Life Ready
- ◯ Social Emotional Learning

Grant Project Implementation Plan and Purpose

18. How will the grant support and fit into the curriculum goals of the campus or district? *

19. How would you define success for this grant, and how do you plan to evaluate its effectiveness? *

20. How many students do you expect this grant to impact during the current school year? *

Please provide a specific number.

21. The Education Foundation provides initial funding with the goal of helping you launch a project that can be sustained and expanded in the future. How do you plan to secure future funding or resources to continue this project once the initial grant period ends? *

22. The Education Foundation has funding limits based on grant type (individual, collaborative, or district-level).
If your request exceeds the maximum amount the Foundation can fund, how will you secure the additional resources needed? Please be specific and include the funding source and account number (e.g., 461 or 199) that will be used to cover the remaining cost. *

23. Promoting your funded grant is essential for demonstrating the impact of the MISD Education Foundation and expressing appreciation to our generous donors. As part of your grant award: *

-You commit to making at least one public submission (e.g., post, photo, video) highlighting the impact of your grant and acknowledging the MISD Education Foundation.

-If you do not personally manage social media, you agree to coordinate with someone on your campus or in your department to fulfill this responsibility.

This commitment reflects your gratitude and partnership with the Foundation and is a factor in consideration for future grant opportunities.

Please use the following handles when tagging the MISD Education Foundation:

Twitter/X: @FoundationMISD

Instagram: @FoundationMISD

Facebook: Mansfield ISD Education Foundation

YouTube: Mansfield ISD Education Foundation

I understand that this initiative is crucial for showcasing the impact of the MISD Education Foundation and expressing gratitude to our donors. I commit to making at least one submission to demonstrate the Foundation's impact and appreciation for their support.

Check all that apply.

- [ ] I agree

24. If the grant is funded, I/we agree to purchase all items by the required deadline and implement the grant in the Spring of the current school year. *

Mark only one oval.

- ( ) I agree

Purchasing

All grant purchases must be from the district approved Vendor list.
**Although Amazon is an approved vendor, items may become unavailable by the time a grant is approved and/or prices will change. It is recommended that you look to other vendors for consistency is pricing and availability.
Budget Sheet must be completed:
Please contact Purchasing to verify contract number if not noted on list. 817.299.6094

25. Vendor Name *

District approved Vendor list.

26. Attach the quote received from the vendor or a PDF copy of your shopping cart (Please do not take a screen shot of your cart. Click save and save as a PDF.) *

Files submitted:

27. Completed Budget Sheet *

Attached completed budget sheet, links provided on the application. **Purchasing approval will not be required prior to grant submission.**

Files submitted:

District/Campus Approval:

Provide your grant application to your Administrator to be approved prior to submission.

28. Grant Approval: Please provide the name and email address of the administrator (for campus-based grants) or the curriculum coordinator (for district-level grants) who has approved this grant submission. *

29. Grant Approval: Specify the date when the grant submission was approved? *

Example: January 7, 2019

30. By typing my name below, I understand and agree that this form of electronic signature has the same legal force and effect as a manual signature. *