



APPLICATION GUIDELINES *Mini-Grant Program*

The SAISD Foundation invites 2020-21 **Mini-Grant** applications beginning October 13, 2020. Applications must be date-stamped and sent through the Pony, addressed to Jennifer Twiss, SAISD Foundation @ Twain, to be received by the SAISD Foundation no later than **November 13, 2020.**

Eligibility:

- Must be an employee in SAISD wanting to positively impact student achievement.
- Previously awarded grantees must have submitted all grant evaluations (including thank you notes, electronic photos, and social media posts) for awarded Innovative and Mini-Grants, as well as submission of receipts for 2020 New Teacher Grants.
- **Incomplete, unsigned, or partially signed applications will not be reviewed for funding.**

Awarding of Funds:

- Grant awards will not exceed \$500 and proposed budgets may be adjusted. Projects exceeding \$500 must state source of remaining funds on the Budget Page or grantees may apply for an Innovative Grant instead.
- SAISD Foundation will allocate grant funds, which must be spent by March 31, 2021.
- Items that can be reused in future years are favorably considered so that future students may benefit.
- Applications are reviewed and scored by a Grants Committee representing the SAISD Foundation.

Requirements and Guidelines:

- **Please submit two-page Application, one-page Budget Page with a quote, vendor invoice, or shopping cart attached, and the Signature Page. Do not include the Application Guidelines page. Print one-sided and paper clip (no staples).**
- Individuals are permitted to submit only ONE Mini-Grant application per campus. Only ONE applicant per Mini-Grant request is allowed. **No duplicate applications are allowed.** If the same grant is being applied for by multiple people, apply for an Innovative Grant as a team, instead.
- Approval of the Principal or Department Head is required on ALL applications (Signature Page).
- Technology grants must use quotes from SAISD 21st Century Learning Department's published pricing, unless items are not available through an SAISD-approved vendor. The budget page must be signed by the District Technology Department (not your campus representative). Make note if you are waiting on their signature.
- Grant requests that include changes or modifications of a campus must include a signed C19-A form from the Facilities Department.
- All project activities must comply with SAISD policies and procedures.
- All purchases under these grants become property of SAISD and require SAISD Foundation stickers to identify items as funded by the SAISD Foundation and property of SAISD.
- All grantees are required to post a *Grant Winner* "lightbulb" sign in a visible location on their campus to help support the Mini-Grants program and raise awareness of the SAISD Foundation's support.
- All grantees are asked to use the Foundation logo and name where their project or program is being displayed, presented or recognized.

Grants will NOT be awarded for:

- Items which are already available through campus, district, state or federal funding.
- Items which are consumable or unable to be reused (ie. food, t-shirts, etc.). Exceptions are rare.
- Aromatherapy

Reporting and Evaluation for Funded Projects:

- A grant evaluation, including electronic photos (it is assumed photos have appropriate photo releases) and student hand-written thank you notes (appropriate to give to donors – those with drawings and what the student has gained from the grant are preferred), is required by May 14, 2021.
- All grantees are encouraged to post grant-related photos or posts in social media (i.e. Twitter, Facebook, or Instagram) and tag @SAISDFoundation and #IgnitingInnovation.



For Office Use Only	
Grant #	
Date Received	

MINI-GRANT APPLICATION COVER SHEET & PROJECT OVERVIEW

The SAISD Foundation believes that investing directly in teachers and District employees is one of the most effective ways to positively affect student learning, student engagement and retention. The SAISD Foundation's *Mini-Grant Program* provides SAISD employees with resources to expand and enrich the academic environment which can provide students with powerful learning experiences that will significantly impact their academic achievement and success as we work to ensure that every student and teacher thrives in SAISD public schools. Please date-stamp and submit this two-page application, one-page budget page, and signature page through your campus *Pony* no later than November 13, 2020. Address to Jennifer Twiss, SAISD Foundation @ Twain. ***Incomplete applications will not be considered.***

Project Title (limit to 40 characters):			
Amount Requested:	\$	Dept/Campus #:	
Campus:		Grade Level/Subject:	
Applicant Name:	Personal Email Address (Optional):		
Applicant Email:		Cell # (Optional):	
Principal/Department Head:		Principal Email:	
Secretary:		Secretary Email:	

PROJECT OVERVIEW

Project is: New Project Expansion of an Existing Project

Project Type: STEM Enrichment Arts SEL Literacy Athletics Co-Curricular (Clubs)

Type of Campus: Elementary Middle School High School Academy ECEC Special Campus

Start Date: _____ Once started is the project ongoing? Yes No End Date (if applicable): _____

Important Date(s) we need to be aware of: _____

Describe your project in one sentence:

Project Summary (limit to the remainder of this page):

PROJECT DETAIL

(limit to this page only)

Describe the need your project will address.

What will be gained as a result of this project? (Desired outcomes in the areas of Attendance, Engagement, &/or Academics)

Detail how you will achieve the outcomes listed above?

How will you know your project has been successful? (Quantitatively and qualitatively in the areas of Attendance, Engagement, &/or Academics – if Academics, include which District assessment(s) you will use, i.e. MAP, CIRCLE, etc.)

How will you celebrate success and share the project with others?

Questions? Email Jennifer Twiss at tpcjtwiss@saisd.net.

BUDGET REQUEST (One Page Only)

Item to be Purchased	Budget Category (i.e. books, supplies, equipment, software)	Purpose (i.e. to help students understand motion, or to build fine motor skills)	Can be Reused Yes/No	Qty.	SAISD Vendor Yes/No	Total Cost Include Shipping	Anticipated Vendor Name
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
						\$	
TOTAL AMOUNT REQUESTED						\$	

Number of students who will be **directly** impacted by this grant this year: _____ Cost per Student: \$ _____

For needs above \$500, please state how balance will be funded: _____

PROJECT/BUDGET APPROVAL:

Technology Department Signature (if applicable)

Facilities C19-A Form is attached: _____

Please **DATE-STAMP** and send through your **CAMPUS PONY** to 'Jennifer Twiss, SAISD FOUNDATION @ Twain', a paper-clipped copy (print one-sided) of the following:

- **TWO-PAGE APPLICATION** (Not to exceed two pages – do not include application guidelines)
- **BUDGET REQUEST** (Not to exceed one page)
- **COPY OF QUOTE, INVOICE, or SHOPPING CART**
- **SIGNATURE PAGE**

DEADLINE: Applications must be date-stamped and placed in the Pony by 11/13/2020.

INCOMPLETE AND LATE APPLICATIONS WILL NOT BE CONSIDERED.

Questions? Email Jennifer Twiss at tpcjtwiss@saisd.net.

SIGNATURE PAGE

I certify that this is my project that I am leading on my campus. I understand that all items purchased with grant funds from the SAISD Foundation become the property of SAISD and must remain on an SAISD campus or in an SAISD department. I also agree to adhere to the SAISD Foundation's reporting requirements and understand that I will be ineligible to apply for a future grant opportunity should I not.

Signature of Applicant: _____ **Date:** _____

As Principal/Department Head, I have reviewed the attached budget and certify that this project is financially sound and is welcome on our campus. The items to be purchased are not currently available on our campus and the project supports the campus goals for student outcomes. Additionally, I will help ensure that the goals and requirements for this project are met.

Signature of Principal: _____ **Date:** _____

I am aware of this grant request and understand that I may be asked to help with the purchasing of requested items.

Signature of Secretary/Bookkeeper: _____ **Date:** _____