

Grants for Great Ideas

Cover Page

Date of Application:

Project Title:

Curriculum Subject(s):

Name of Project Leader:

Campus phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Leader Agreement:**

***By signing as Project Leader below, I understand that, if the Santa Fe Texas Education Foundation (SFTXEF) funds my grant, I will be the contact for this project and communicate with the SFTXEF. If I cannot follow through with the project, I will notify the Foundation promptly so that arrangements can be made to transfer or cancel the grant.***

 ***I am responsible for implementing the project. I will address any safety issues associated with my project. I will submit a Final Report Form to the SFTXEF, which includes pictures or video of Ferpa-approved students and/or student work examples. I understand that my report and photos may be used in SFTXEF promotional materials. I am willing to present to the SFTXEF board regarding my project.***

***If I move positions within SFISD, and I have written this application involving no other educators, I may take the grant proceeds with me to another campus (as long as it is age-appropriate for my students). If I have written this grant as part of a team of educators, I will leave the grant proceeds with the team. If I leave SFISD, I will leave the grant proceeds with the school for which I wrote the grant****.*

Project Leader Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other educators who assisted with the writing of this application and/or additional educators that will be involved with the implementation of the project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Campus Principal or Asst. Principal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_