

Grant Application Form

Any request must be aligned with the mission statement of the Alton Educational Foundation. The mission statement is *to raise funds for innovative projects that provide enhanced educational opportunities, support academic excellence and encourage student achievement throughout School District 11.*

Date: _____

Applicant: _____ School: _____

School Address: _____ Principal: _____

Project Title: _____

Amount Requested (required): _____

Project Members: _____

*What is the objective of your project?: _____

*How many students will benefit from the project?: _____

*How will your project enhance educational opportunities that are not currently available?: _____

*What is innovative about your project?: _____

*How will your project encourage student achievement?: _____

*How will the requested funds be used? Please attach another sheet and list the items you would like to purchase (please list items, quantity and cost): _____

*Describe the follow-up evaluation?: _____

*Is funding available from any other source?: _____ Have you applied for other funding?: _____

*Is the project self-sustaining?: _____

*How will your project contain innovative concepts that will help students achieve the New Illinois State Standards?: _____

***Please present an outline of a thoughtful implementation plan.**

If you are requesting a technology grant, will this technology be supported by the “district plan?” If you aren’t sure, please discuss your grant with your building’s technology coach.

Return this form to the Alton Educational Foundation, PO Box 514, Alton, IL 62002.