



2023-2024 Annual Grant Program Application Form

This application form is used for our Annual DPSF Grant Program.

Grant applications must be typed.

Send a hard copy to Karen Heidt % DPS Foundation or email to kheidt@dpsnd.org.)

Grant applications are due Friday, December 15, 2023.

Date: _____

Project Title: _____

Contact Person: _____ School/Building: _____

Position/Title: _____

Email Address: _____

Telephone #: _____

Please check: Certified Classified

Please check: Individual/Teacher Grade Level Team

Building Level/School-wide Team District-wide Team

Subject Area Team/Department

Other _____

Collaborating partners (if applicable):

Name: _____ Title: _____ School: _____

Name: _____ Title: _____ School: _____

Name: _____ Title: _____ School: _____

Name: _____ Title: _____ School: _____

Amount Requested: \$ _____

Which Foundation Focus area/areas applies to your grant? (Please check)

Academic Success

College and Career Readiness

Community

Cultural

Early Childhood

Professional Development

STEM/STEAM

Student Wellness & Mental Health

The Arts

Project Description/Overview

Briefly describe your proposed project.

Why is your project needed?

Include website for product/project (if applicable):

Objectives/Goals

What are the major objectives/goals of this project?

Impact on Students

How will the students' educational experience be enhanced, improved or changed as a result of this project?

What will the project look like in action? Give a detailed explanation of what an observer would see.

Approximately how many students will be impacted by this project?

Evaluation of Project

How will you evaluate the effectiveness of the project?

Technology Plan

Does your grant require technology? Yes No

If no, continue to Budget Summary. If yes, complete ALL questions in this section.

Who will install and/or set up software/hardware? Name: _____ Title: _____

Who will repair and/or replace software/hardware? Name: _____ Title: _____

Does your technology come with a service plan? Yes No

Does your technology require a license or subscription? Yes No

If yes, who will pay for the renewal fees? _____

Does your grant require other technology or accessories to operate? Yes No

If yes, do you have it or a plan to acquire it? Please explain.

I understand the district technology department is not responsible for installing, updating, licensing, repairing, or replacing any technology obtained from this grant.

If applicable, I have completed the district's "[Software Purchase Request](#)" form. This will be taken into consideration for grant approval. Please note the Foundation retains the right to make the final decision.

Budget Summary (include itemized expenses for material/equipment)

Describe the proposed project budget. State specifically how the money will be used.

Example: List all books, equipment, materials, software to be purchased along with prices, service plan, shipping costs, etc.

Item Description	Quantity	Unit Price	Total
Cost			
Shipping/handling costs:			
Total Project Cost:			\$ _____

Applicant's signature(s): _____

_____ Date: _____

Building administrator's signature: _____ Date: _____

For Foundation use only:

Date Application was received: _____ Application received by: _____