

***Innovative Teaching Grants***

***Grant Application Packet for Teachers***



**Innovative Teaching Grants  
Fall 2023**

August 1	Publish grant application to DISD staff
<b>Nov. 10</b>	<b>Grant applications Due</b>
Nov. 27-30	Review Committee meets
Dec. 4	Education Foundation Board of Directors Meeting
Dec. 18	School board meeting
<b>Jan. 8-12</b>	<b>Prize Party!</b>

*"If an extraordinary opportunity arises outside of the grant cycle, the DEF board reserves the right to consider awarding grant monies as an exception to grant timeline parameters."*



## **Innovative Teaching Grants Guidelines for Grant Applications**

### Purpose:

Innovative Teaching Grants are designed to encourage, facilitate, recognize and reward innovative and creative instructional approaches to the accomplishment of program objectives. Devine Education Foundation (DEF) is offering teachers and administrators the opportunity to apply for grants to support innovative programs or projects to support higher levels of student learning. The grants must enhance student academic performance and support the objectives, goals, and initiatives of the Campus Action Plan.

### Persons Eligible to Apply for Grants:

Individuals or teams of individuals employed by Devine Independent School District who are involved in the instruction of students or related support services benefiting students.

### Eligible Proposals:

Instructional approaches or projects designed to begin during the 2022-2023 school year and which meet the selection criteria. Grants may fund instructional and classroom materials, parent involvement programs, or any activity or material which supports higher levels of student academic achievement.

### Award of Funds:

Grants of up to \$1,000 will be awarded to individual teacher initiated programs or projects. Grants of up to \$5,000 will be awarded to campus teams, departments and district initiated programs or projects. The number and amount of awards will depend on funds available from DEF.

### Selection Criteria:

- The degree to which the grant supports the district goals and the campus action plan and is specifically designed to address an area of need substantiated by data.
- The degree to which student academic performance is emphasized.
- The degree to which sound evaluation procedures are incorporated in the proposal.
- The degree to which the proposal represents a creative or innovative approach to the accomplishment of objectives. Funds are not typically available for recurring programs/projects. (The proposal should address a new project as opposed to one accomplished or under way.)

- The degree to which the proposal is clear and logical, including (a) specificity of objectives; (b) clarity of description of instructional procedures, methods or treatments; and (c) correspondence among evaluative procedures, objectives and treatments.

***Grant Applications should be submitted to the DEF electronically.***

*Email application as an attachment to [brenda.gardner@devineisd.org](mailto:brenda.gardner@devineisd.org).*

*A hard copy with original signatures on the cover sheet must be forwarded to DEF, 605 W. Hondo, Devine, TX 78016.*

**Selection Process:**

1. Application forms may be obtained online through the web page.
2. Teacher initiated applications must be reviewed by the Campus Leadership Team for congruence with campus programs and signed by the principal.
3. Signed applications are due to the DEF office, no later than the date selected by the DEF Board of Directors.
4. Applications will be reviewed and commented on by the Grant Application Review Committee made up of the following members:
  - a. Five Education Foundation directors appointed by the president of the DEF Board of Directors
  - b. Two Community Representatives as approved by the Foundation Board of Directors
  - c. Director of Elementary Curriculum and Director of Secondary Curriculum (nonvoting members)
  - d. Others as determined by the DEF Board of Directors
5. If recommended for approval, the application is presented to the Board of Directors of DEF in summary form for review and formal approval.
6. If approved by the DEF Board of Directors, the application is collectively presented to the Devine School Board for formal acceptance of the grant funds.
7. Applicants will be notified of decisions by the date specified by the committee.

**Responsibilities of Grant Recipients:**

- Use the awards for the purposes intended.
- Funds must be expended by the end of the semester immediately following award notification. Projects awarded must be fully implemented by the end of the following semester.
- Project must be fully implemented and final report submitted to DEF before recipients can submit an application for another grant.
- Agree to share successful procedures in staff development sessions.

**When applying for a grant, please remember the following:**

- Do not use the name of your campus in the application.
- Grants are to be used to fund projects that cannot be provided for in the school and district budgets.
- Objectives and outcomes should be consistent with the goals of your school and the district.
- Grants cannot be used to fund teacher training or travel. When creating your budget, research carefully and be realistic. Small grants are just as likely to be awarded as large grants. Partial funding will be considered. Funds will not be awarded for budgeted items available from district resources.
- Projects awarded must be fully implemented by the end of the following semester.

- ***Grant Applications should be submitted to the DEF electronically. Email application as an attachment to [brenda.gardner@devineisd.org](mailto:brenda.gardner@devineisd.org). A hard copy with original signatures on the cover sheet must be forwarded to the DEF office, which is the DISD Central Office, 605 W. Hondo***

### **Tips for a Successful Application**

#### *Statement of Need:*

- Describe the area of student achievement you wish to address and give any data that supports the need. Please include how this grant addresses district and campus goals.
- Keep the statement simple and straightforward.
- Show how project relates to the District/Campus Action Plan(s).

#### *Objectives:*

- Limit the number of objectives.
- Imply or state evaluation in the statement of objectives.
- Be specific.

#### *Description of Proposed Project/Activity:*

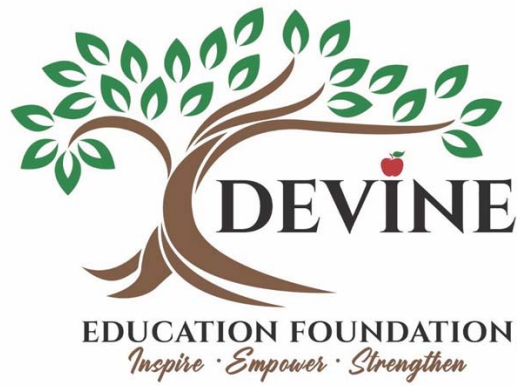
- Describe the problem or issue addressed.
- Show how the project supports the purpose.
- List steps to be followed in project implementation.
- Relate project to need and objectives.
- Be specific.

#### *Evaluation:*

- Relate to stated objectives.
- Indicate how you will know whether the project was successful.

#### *Partners:*

- Are there others who will participate in this project? (Another class, an organization, etc.)
- What will their roles be?



**Innovative Teaching Grant Application  
Cover Page**

Project Title: \_\_\_\_\_

Check one:   ☐   Single applicant                      ☐   Grade-level or department applicant

Name of Applicant(s)

Signature of Applicant(s)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

School(s) \_\_\_\_\_

Grade(s) \_\_\_\_\_

(list each grade level)

Subject(s) \_\_\_\_\_

Number of Students \_\_\_\_\_

Amount of Grant      \$ \_\_\_\_\_

Primary target population to be served:

\_\_\_\_ students (target group: \_\_\_\_)

\_\_\_\_ parents

\_\_\_\_ teachers

Implementation dates: \_\_\_\_\_

Signature of Campus CIS \_\_\_\_\_ Date \_\_\_\_\_

Signature of Principal \_\_\_\_\_ Date \_\_\_\_\_

Signature of Director of Instructional Technology\* \_\_\_\_\_ Date \_\_\_\_\_

*\* Required when funds will be used to purchase technology and/or media equipment.*

Signature of Director of Facilities\* \_\_\_\_\_ Date \_\_\_\_\_

*\* Required when funds will be used for construction or maintenance.*

Abstract (no more than 100 words)

*(This page will not be seen by the Review Committee)*

## Innovative Teaching Grant Application

**IMPORTANT - Do not include the name of your campus in the Project Title or application**

**Project Title:** \_\_\_\_\_

Grade(s) \_\_\_\_\_ Subject(s) \_\_\_\_\_ Number of Students \_\_\_\_\_  
(List each grade level)

CHECK ONE: This project is:

☐ New to the district      ☐ New to my campus      ☐ New to me.

CHECK ONE: Have you received funds for this project from DISD previously?

☐ Yes      ☐ No

**DIRECTIONS:**      Please provide a summary for each area listed below.

**Need:** (Describe the area of student achievement you wish to address and give any data that supports the need. Please include how this grant addresses district and campus goals.)

**Objectives:** (State measurable objectives in terms of student behavior or performance.)

**Description of Proposed Project/Activity:** (Describe what you want to do with the grant funds. List activities and timeline. How is it innovative?)



**Evaluation Strategy:** (Describe how you will know if your objectives are met. How will you share your program's successes with your peers?)

**Partners:** (Identify any school and/or community partners involved in the project and their respective roles.)

**Sustainability:** (If funded, how will you continue the program/project in the future? What will be the recurring costs? How will this program/project be funded in the future?)

**DIRECTIONS:** Note the budget distribution for each category. Be specific.

Budget Items	Amount	Vendor	Budget Code Business Office
Supplies (please list)			
Equipment			
Contracted Services (list consultants)			
Other:			
TOTAL			

**Education Foundation**  
**Criteria for Grant Reviewer Scoring Matrix**

Application Number \_\_\_\_\_

Evaluator # \_\_\_\_\_

Project Title \_\_\_\_\_

*Please rank the effectiveness of each item with 3 being high and 1 being low. Circle the number that best describes each statement.*

**Please check the statement below that best describes how you would rank this application.**

- ☐ I would definitely recommend funding this project.
- ☐ I would recommend partial funding. Amount? \$ \_\_\_\_\_
- ☐ I would recommend funding this project if there were extra money.
- ☐ I would not recommend funding this project.

<i>Criteria</i>				Weighted Amount	Weighted Total
Need is clearly stated. Supports districts and campus goals.	3	2	1	X 3	
Objectives are specifically stated and measurable.	3	2	1	X 2	
Activities/procedures specifically stated and relate to purpose and objectives. Innovation is apparent.	3	2	1	X 3	
Evaluation strategy is clearly stated and relevant to the objectives and student performance.	3	2	1	X 2	
Budget is complete, realistic, accurate and appropriate.	3	2	1	X 2	
Project includes participation and support of parents, community and/or business partners.	3	2	1	X 1	
<b>GRAND TOTAL</b>					

Additional Comments (please use back if necessary)