Special Education Enrichment Grants Application Worksheet

Please Note: This document is view-only. To make edits, you will need to either download the document or create your own copy.

This worksheet is intended solely as a planning resource to help you organize your ideas and gather the necessary details for your grant application. Completing this worksheet does **not** constitute submitting an application.

Once your worksheet is complete, you may copy and paste your responses into the online application. To be considered for funding, you **must** submit your final grant application through the official application form at https://stvrainfoundation.org/programs/educator-grants/special-education-enrichment-grants-application/

Section 1: Applicant Information

This section is for your contact information, school name, principal name/email, grade levels taught and subject/content area taught.

Section 2: Project Details

When completing this section, please know that your responses do not need to be lengthy. We encourage you to keep answers concise, as long as they fully address the questions. The most important thing is that review board members are able to gain a clear and solid understanding of your project and its impact. Focus on providing clear information rather than long explanations.

Project Title Provide a short, descriptive title for your project. (50 character max)

Project Overview Briefly describe your project and the key activities or strategies you plan to use.

Project Classification (Radio button provided to select one)	
This is a new project.	This project supports an existing endeavor.

Student Needs What specific needs or challenges of your students will this project address?

Student Impact What specific skills or growth do you hope students will achieve?

Expected Results What specific outcomes do you hope students will achieve through this project?

Measuring Success How will you track or measure the impact of your project?

Reach Approximately how many students will benefit from this project? (Enter a number only)

School Community Impact How will this project positively affect your school community as a whole?

Section 3: Budget Information

Amount Requested How much funding are you requesting from the Education Foundation? (Enter a number only, up to $1,000)

Budget Breakdown List each item or service you plan to purchase and its cost. Be specific and include shipping or fees (if applicable). Do not include taxes, as all school purchases are tax-exempt. Total should match the Amount Requested above.

Future Funding Needs Will this project require funding beyond the first year? (Radio button provided to select one)	
Yes	No

Partial Funding Plan If only part of your request is funded, how will you move forward? Have you identified or pursued other funding sources?

Other Funding Are you seeking support for this project from other sources such as PTO/PTA's, Community Grant or another organization?	
Yes	No
If yes, please explain if you are asking for additional funding above what is requested above or if you requested funding for the same amount.	

Section 4: Acknowledgement of terms and agreement

In this section you will review the terms for grant awards.