HTEF Grant Application

Make a copy of this document in order to edit. Then, information should be typed into this document and shared with the building principal.

Applicant and Grant Information				
Name				
School				
Position/Title				
Email Address				
Title of Project/Activity				
Amount Requested				
Description				
Goals & Objectives: Provide a project, activity, or initiative.	summary of your proposal. Please include the goals and objectives of this			
/T . D . L . T L . (7 L				
include grade levels, a descripti	number of students being served by this project, activity, or initiative. You may on of student population, etc.			
~ -				
~ -				
~ -				
~ -				
~ -				
~ -				
include grade levels, a descripti				
Timetable for Implementation:	on of student population, etc.			
Timetable for Implementation:	on of student population, etc.			
Timetable for Implementation:	on of student population, etc.			
Timetable for Implementation:	on of student population, etc.			
Timetable for Implementation:	on of student population, etc.			
Timetable for Implementation:	on of student population, etc.			

Budget: Use the chart below to provide a detailed budget that includes the material project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm cover the cost. Item Description Shipping & Handling (if unknown, add 15%)	e in the district as well
project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm cover the cost.	e in the district as well a S&H or add 15% to
project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm cover the cost.	e in the district as well a S&H or add 15% to
project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm cover the cost.	e in the district as well a S&H or add 15% to
project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm cover the cost.	e in the district as well a S&H or add 15% to
project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm cover the cost.	e in the district as well a S&H or add 15% to
project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm cover the cost.	e in the district as well a S&H or add 15% to
project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm cover the cost.	e in the district as well a S&H or add 15% to
project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm cover the cost.	e in the district as well a S&H or add 15% to
project. Please ensure that you have researched the equipment/materials available as district approved vendors before requesting them in your application. Confirm	e in the district as wel
project. Please ensure that you have researched the equipment/materials available	e in the district as wel
Budget: Use the chart below to provide a detailed budget that includes the materi	als needed for the
Please provide any other relevant information about your proposal.	
b.) promotes student engagement, teaching innovation, and/or teacher collaborat	ion.
a.) enhances the curriculum and/or supports the Standards.	
Impact: Describe how the project, activity, or initiative	
or evidence-based terms.	

Project Coordinator Checklist

Please enter your initials to indicate that you accept the following requirements

Checklist Items	Initials
The grant applicant has contacted relevant personnel to ensure that the	
materials/equipment requested are not available within the district.	
All materials purchased with grant funds are property of the Haddon Township	
School District.	
The grant applicant will submit receipts for expenditures within thirty (30)	
school days of project completion.	
If the project comes in under budget, all unused funds will be returned to the	
HTEF within thirty (30) days of project completion.	

Signatures and Date Submitted

This form can be submitted digitally using the Google Doc "Share" feature.

Applicants – E-sign and share the Google Doc application with your building principal.

Building Principals – if the application is accepted, please e-sign and share with the Superintendent.

Name	Signature	Date
Grant Applicant		
Principal		
Superintendent		

Thank you for completing this application form. All applicants will be notified via email of the result of their application.

If you have any questions, please email us <a href="https://ht

•••••

HTEF Use ONLY

Name	Signature	Date
Received by		
Reviewed by		
Grant Awarded by		
Grant Denied by		
Applicant Notified by		