

This form will be used by members of the Mini-Grant Program committee as a guide for reviewing proposals.

**Name of Project:** \_\_\_\_\_

1. Read each proposal carefully.
2. Use the list of statements in Section A to judge each proposal. Mark each item on a scale of one to ten, one being the lowest rating. When all statements have been marked, total the responses and place this number on the line marked Subtotal A. The minimum score on this section is 7; the maximum is 70.
3. In Section B, give each proposal a rating for overall value. You may assign up to 10 points here for each category.
4. Add Subtotals A and B and place the score in the Grand Total Blank. The maximum score possible is 100 points.

**A. To what extent: (1 to 10 points)**

1. Does the proposal communicate a need for the classroom? \_\_\_\_\_
2. Are the goals or objectives clearly defined and capable of being attained? \_\_\_\_\_
3. Are the activities feasible and appropriate? \_\_\_\_\_
4. Is the timeline clearly defined and capable of being attained? \_\_\_\_\_
5. Is the project evaluation related to the activities and goals of the project? \_\_\_\_\_
6. Does the project serve the needs of the students? \_\_\_\_\_
7. Are the requested funds appropriate for the project as defined? \_\_\_\_\_

**B. Overall Value: (1 to 10 points)**

1. Number of students affected. \_\_\_\_\_
2. Cost per student. \_\_\_\_\_
3. Overall value of proposal. \_\_\_\_\_

**SUBTOTAL A** \_\_\_\_\_

**SUBTOTAL B** \_\_\_\_\_

**GRAND TOTAL** \_\_\_\_\_

**NAME OF RATER:** \_\_\_\_\_



## MINI-GRANT APPLICATION

DIRECTIONS: Please **type** all completed responses in the space provided. If extra space is needed, attach additional **typed** sheets. Do not write on the back of pages.

Applicant's Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone Number \_\_\_\_\_

School \_\_\_\_\_

School Phone Number \_\_\_\_\_

Position or Title \_\_\_\_\_

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

\_\_\_\_\_

**When completing your grant application please include information identifying your school on this cover page only.**

**Thank you.**

I grant to A+ for Mexico Education the right to use this proposal and the results of the project, if funded, for public information purposes or to help other educators.

Applicant's Signature \_\_\_\_\_

Principal's Signature \_\_\_\_\_

Date \_\_\_\_\_



**Project Title**

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**Budget Request**     \$ \_\_\_\_\_

If only partial funding for your project is available, would you be willing to accept partial funding?

Please answer YES or NO here \_\_\_\_\_

Please read below for additional information.

If you answered YES to the question above that you would be willing to accept partial funding for your project, please list the dollar amount here \$ \_\_\_\_\_

On a separate sheet of paper make a separate list of items that would be funded by the partial grant and attach the list after the **Budget Request in Section D of application form.**

**One Paragraph Summary Description:**

**A. NEED**

1. What classroom/school need, problem or opportunity does the proposed project address and how was the need or opportunity identified.

**B. STATEMENT OF OBJECTIVES AND EVALUATION**

2. What are your objectives? Please include specific desired outcomes.

3. Approximately how many students will be affected by this project? Please explain your number.

4. How will you determine whether the project has successfully met your objectives?  
Describe specific means of evaluation for each objective.

5. What will happen to the project at the conclusion of the grant? If it is to continue, how will it be funded?

## **C. TIMELINE OF PLANNED ACTIVITIES**

**D. BUDGET REQUEST**

6. Fill out your budget request below. Include information such as kinds of materials, equipment needed, sources of supply and cost. Please be as specific as possible.

Payments for services of Mexico Public Schools or St. Brendan employees are prohibited.

ITEM	SUPPLIER	COST

TOTAL BUDGET REQUEST: \$ \_\_\_\_\_