

**2024-2025 *Grants for Innovative Teaching (GFIT)* Application Form**

Please complete the application on your computer by fully answering each question. Be sure to save a copy of your completed application for your records on a location other than your school computer. If a question does not apply to you, please type N/A in the space provided. Please note that there will not be a deadline extension and all applications are **due April 15, 2024** by **11:59 P.M.**

**(Please note that no extensions will be granted.)**

1. **PROJECT NAME**

|  |  |  |
| --- | --- | --- |
| Title of Project: |  | |
|  |  |

1. **PERSONAL AND SCHOOL INFORMATION**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Educator Name: |  | | | | | | | | |
|  | Last | | First | | |  | | |  |
| Your Position: |  | | | | | | | | |
|  | (e.g., 3rd grade teacher, 8th grade math teacher, AP biology teacher, librarian, etc.) | | | | | | | | |
| Preferred Pronoun | ☐ He ☐ She ☐ They | | | | | | | | |  |
| ☒ | I confirm that I will be employed by Dallas ISD for 2024-2025 school year. | | | | | | | | |
| School: |  | | | | | | | | |
|  |  | | | | | | | | |
| School Address: |  | | | | | | | | |
|  | Street | | | | | | | | |
|  | City | State | | | | | | Zip Code | |
| Summer Email: |  | | |  | Summer  Telephone: | |  | | |
| School Email: |  | | |  | School  Telephone: | |  | | |
| **A *GFIT* researcher will contact you in May/June regarding your application; please respond in a timely manner.** | | | | | | | | | |
| Principal Name: |  | | |  | Principal Email: | |  | | |
| ☐ | By checking this box, I affirm that my principal approves of this application, and if funded, will support this project. | | | | | | | | |
|  |  | | | | | | | | |
| School Feeder Pattern: |  | | | | | | | | |
|  | (e.g., Wilson, Hillcrest) | | | | | | | | |
| ☐ | No, I have not previously received *Grants for Innovative Teaching* funding. | | | | | | | | |
| ☐ | Yes, I have previously received *Grants for Innovative Teaching* funding. Please explain. | | | | | | | | |
|  |  | | | | | | | | |
|  |  | | | | | | | | |

1. **DETAILED PROJECT SUMMARY**

|  |  |  |
| --- | --- | --- |
| Target Population: | |  |
|  | | (e.g., grade level & subject) |
| Grade Level(s) Impacted: | |  |  |
|  | |  |
| Number of Students Directly Participating: | |  |
| **Please choose the category(ies) that best describe the subject matter covered by your grant request.** If you choose more than one below, please rank them in order of importance in the ‘Other’ box, below. | | |
| ☐ | STEAM (Science, Technology, Engineering, Art, and Math) | |
| ☐ | STEAM with Texas Instruments (TI) technology | |
| ☐ | Literacy | |
| ☐ | Diversity | |
| ☐ | Arts/Cultural | |
| ☐ | Other | |
|  |  | |
|  | (If you checked “Other,” please describe) | |

**Project Summary.** Provide a brief narrative (10-15 sentences) describing your project. Please include the need, goal, target population and program components.

**Innovation.** How or why is this project innovative (provide three (3) examples)?

1. **Project Implementation, Objectives, and Evaluation**

List each objective and describe the evaluation method/tool used for each objective's major activities, as well as the expected results to be achieved for each objective. Please use the following table for this section. If your evaluation tool includes a grading rubric, please attach a sample rubric showing the criteria that will be used to evaluate each student. (**REMEMBER**: Objectives should be specific and measurable and relate to the project evaluation).

|  |  |
| --- | --- |
| **Please check which evaluation tools will be used to assess student learning and anticipated results**: | |
| ☐ | Pre-/Post-Test |
| ☐ | Quizzes |
| ☐ | Unit Testing |
| ☐ | Oral presentation |
| ☐ | Visual presentation |
| ☐ | Creative Product |
|  |  |
|  | (Please specify Dance, Mural/Sculpture, Song/Instrumental, etc...) |
| ☐ | Other |
|  |  |
|  | (If you checked “Other,” please describe) |

1. **Timeline**

**Timeline.** Projects MUST be completed within the allowable time frame of **Sept. 1, 2025 – April 1, 2025.** (Note: Grant funds may not be distributed to grant recipients until the end of September.) Please provide a work plan schedule, which includes, as applicable, ordering/receipt of materials, actual classroom implementation, evaluation, and other significant dates. Please be as specific as possible and provide details here:

**Additional Information.** Please provide any additional information you feel is necessary for the JLD researcher to know about this proposal or project.

1. **Budget**

**Budget.** A complete budget worksheet **must** **be uploaded with your application**. (Information may be cut and pasted into this application from an Excel file, or a separate Excel file may be included with this application.) Dallas ISD can only authorize the purchase of items from confirmed Dallas ISD vendors. Please ensure that you only list the approved Dallas ISD approved vendors on [this list](https://www.dallasisd.org/Page/11659).

**Budget Worksheets.** Grant recipients will be required to submit an expense report and legible copies of all receipts with their final evaluation. Grant monies may only be used for the project and for the expenses as presented on this budget or as approved by amendment by the *GFIT* Budget Analyst and Committee Chair. Obtain current price quotes for all items listed on the budget by using a new vendor catalog, visiting the vendor's website, or by contacting the vendor directly. Include shipping/handling costs as a part of your budget.

If purchasing **Texas Instruments (TI) technology**, please note this in budget.

The Junior League of Dallas, Inc. (“JLD”) does not reimburse sales tax. Please remember to use your school’s tax-exempt certificate when purchasing items.

|  |  |
| --- | --- |
| ☐ | I confirm that the vendors listed in my budget are Dallas ISD-approved vendors. |

**Media Release Consent Form**

For good and valuable consideration, the receipt of which is hereby acknowledged, I do hereby irrevocably authorize the JLD and give it unrestricted permission to take photographs and/or video of me and to use and publish the same for publicity, illustration, advertising or any other lawful purpose.

I do hereby waive any right that I may have to inspect or approve the images, video, finished product or other copy that may be used in connection therewith or the use to which it may be applied. I hereby release and discharge the JLD, its successors and assigns and all persons acting under its permission or authority, from any liability by virtue of any use whatsoever, whether intentional or otherwise, that may occur in the taking of the photographs/video, the completion of the finished product or their publication, unless it can be shown that the photographs/video were maliciously taken, produced and published solely for the purpose of subjecting me to conspicuous ridicule, scandal, reproach, scorn and indignity.

1. **Pictures and/or Video**

If you are granted the award and in order to show community impact, JLD asks that you provide your researcher pictures and/or video of your project in your final report upon completion of the project. Please note that pictures and/or video are not expected with this initial application.

The pictures and/or video allow JLD and the broader Dallas community to see the impact that DISD teachers are making with innovation in the classroom. If you are awarded the grant, thank you for providing the pictures and/or video to your researcher in your final report due at the end in April.

|  |  |
| --- | --- |
| ☐ | I confirm that I will send pictures and/or video of my project. |

1. **Signature**

I do hereby warrant that the information provided in this application is true and correct to my knowledge. I further warrant that I am of legal age and have every right to contract in my own name with respect to the agreements, terms and conditions set forth in this application, including the media authorization and release set forth in Section VII.

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Signature

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Printed Name

**PLEASE SAVE APPLICATION AS PDF FILE.**