

EDUCATIONAL FOUNDATION PROGRAM REQUEST CHECKLIST

- 1. I came up with a creative, innovative idea to enhance student learning.
- 2. I shared the idea with my grade level and/or department.
- 3. I invited them to write the proposal with me.
- 4. I completed the South St. Paul Educational Foundation Program Request.
- 5. I will submit the attached request to the Educational Foundation at least two weeks prior to the Educational Foundation Board meeting so the request can be considered in a timely manner (The Educational Foundation Board meets the second Wednesday of every month.)

The Educational Foundation will contact me as to whether or not my request has been granted.

6. I will attend an Educational Foundation Board meeting if necessary.

\$15,000 and above	Special conditions for documentation and bidding may apply. Consult the Executive Director.
More than \$2,500	Presentation by the originator to the program committee and full board. Administrator or supervisor must be present for the presentation.
\$500-2,500	Presentation by originator to the program committee is required before a recommendation will be made to the full board.
Up to \$500	Proposals will be reviewed by the committee and recommendations made to the full board. Presentations to the program committee are optional.



Program Request N	0:
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South St. Paul Educational Foundation Program Request

1.	Describe what you want to do, and you will do it:
2.	What need or opportunity will be served if this request is granted?
3.	Describe what you want to do and how you will do it.
4.	What need or opportunity will be served?
5.	Who will benefit from this program?
6.	What research or experience supports your request?
7.	How does this align with existing curriculum, priorities, or strategies?
8.	Are there any other resources available such as matching funds or other contributions?
9.	Is this funding for: a one-time event a recurring program a resource
10.	How will you share your results and the value of this program? (i.e. Pictures, testimonials, letters etc.)
11.	How can this program be shared or extended to other schools, classes, or groups?

Estimated c	ost:						
Number of students and staff who will benefit:							
Date funding required:							
Estimated date of completion:							
Request originator/Contact Person:							
Recommendation of Principal or Administrator:							
Signature of Principal or Administrator Curriculum/District Approval							
Foundation Board Action Approved Not Approved Holding Need additional data							
Date:	Moved:	Second:	Program				