



*Enhancing the educational experience of our community through creativity, collaboration, and commitment.*

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## **2023 Grant Guidelines**

Region 10 Make A Mark, Inc. is dedicated to sustaining and extending the excellence of the Region 10 School District by providing a source of funding for expanded educational opportunities for Region 10 students. Grants are provided for creative and innovative instructional practices that will enhance the learning of students as well as support the mission of Make a Mark. Grants may be given to teachers, administrators, guidance counselors, other school personnel, or students who propose projects that would not normally be funded by the Region 10 Board of Education budget.

### **Please review the Grant Guidelines before completing the application:**

- Grants can be awarded to Region 10 staff and students. A faculty advisor must be the primary applicant if a student is applying for a grant.
- The number of students impacted by the project will be considered. Collaboration between grades, disciplines, schools and/or the community is encouraged. If the grant application is for a project/initiative that will take place in more than one building the signature/approval of all building Principals must be obtained before the grant will be considered by the review committee.
- Grants do not provide compensation for substitute teachers, or salaries/stipends for staffing as part of an approved project.
- All applications that include hardware and/or software requests should be shared with Joe Sousa, Director of Technology, for compatibility or sustainability assurance prior to being submitted.
- Grant applications requesting partial funding will not be considered unless the applicant demonstrates that funding for the remainder of the project has been secured.
- Completed grant applications may be submitted year-round (to [makeamarkr10@gmail.com](mailto:makeamarkr10@gmail.com)) Applications that are received by the first of the month September – June will be reviewed monthly. Applications received June 2 – September 1 will be reviewed in September. Applications that are approved by building principals will be reviewed by Region 10 Make a Mark for consideration and final approval. Please note that once a grant is submitted the review/decision process will take approximately one month so please plan accordingly.
- Grant recipients will be required to complete and submit an evaluation form at the conclusion of their project. Region 10 Make a Mark will request a follow up interview or presentation by the grant recipient and information may be shared with the district and/or posted on the social media accounts of Make a Mark.



## 2023 Grant Application

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

Role: \_\_\_\_\_

Name of School: \_\_\_\_\_

Contact Information Email: \_\_\_\_\_ Phone: \_\_\_\_\_

*Co-Applicant/Faculty Advisor (if applicable):* \_\_\_\_\_

*Contact Information Email:* \_\_\_\_\_ *Phone:* \_\_\_\_\_

**Please respond to the following questions. Responses should provide enough information so that the committee has a clear understanding of your project.**

1. Title of Project:
2. Provide a description of the project including key goals, anticipated outcomes and/or benefits for both students and teachers.
3. How will this project enrich the overall educational experience of Region 10 students? Describe the innovative aspects of the project.

4. Identify the people that will be involved in this project including the number of students and classes that may be positively impacted. Is this project going to occur during the school day or after school?

5. Budget *(complete details below and/or attach spreadsheet)*

Supplies:	\$	_____
Equipment:	\$	_____
<b>Total:</b>	<b>\$</b>	_____

6. Provide an estimated timeline for the project, including start date, key milestones and date of completion.

7. How will you evaluate the educational impact of this project?

8. Additional information/comments:

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Signature of Applicant

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Date

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Signature of Faculty Advisor *(if applicable)*

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Date

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Signature of Region 10 Technology Coordinator *(if applicable)*

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Date

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Signature of Building Principal(s)

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Date

**-Please submit completed form to [makeamarkr10@gmail.com](mailto:makeamarkr10@gmail.com)-**