PROPOSAL FOR FUNDING TO THE WEST IRONDEQUOIT FOUNDATION

This application must be signed by the applicant’s supervisor/principal and submitted to the office of the Asst. Superintendent for Instruction by February 28.

Project Title: _________________________________________________________

Person(s) Proposing the Project: _________________________________________

Description of Project: 
(See criteria on page 3)

A. Purpose(s)

B. Project Target Group:_________________________________________________________

C. Student Learning: Describe in detail how student learning will benefit from this proposal. What need is addressed? What learning activities will result from it?

D. Number of students to be served by this project: ____________________________

E. Other:
**F. Funding:** List the funds required to support this project.

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Equipment (list each item)</td>
<td></td>
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<tr>
<td>2. Supplies</td>
<td></td>
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<tr>
<td>3. Renovations</td>
<td></td>
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<tr>
<td>4. Other</td>
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</table>

**Total:**

If your grant request is for technology or audio visual equipment, please ask the District Media Services Coordinator (336-2967) or the District Director of Technology (336-2976) to review your proposal to ensure that you have listed all of the necessary components and found the best pricing to make your project a success.

_______________________________________________________  Date ____________
Media Services Coordinator / Director of Technology signature

**G. Explain why funds for this project are not included in the regular budget:**
West Irondequoit Foundation

Grant Criteria

Grant proposals to the West Irondequoit Foundation will be evaluated based on the following criteria:

☐ A. Proposal is consistent with the purpose of the West Irondequoit Foundation. It represents an extraordinary expense; one which would not ordinarily be funded through the district’s annual budget.

☐ B. Proposal is important. It aligns closely with stated district academic outcomes and NYS standards.

☐ C. Proposal is cost effective, with respect to the overall cost and number of students served.

☐ D. Proposal has potential for transfer of knowledge/application, such that others are likely to build upon the idea/project, thereby extending its use.

☐ E. Proposal demonstrates QUALITY and VALUE. It has a high likelihood of success, clarity of purpose and/or possesses creativity or cutting edge attributes.

Process Schedule

☐ Submit approved grant request to WICSD (Superintendent’s Office) by February 28

☐ Designated district administrator presents proposals to WIF Board at the April meeting.

☐ WIF Board decides on final funding at May meeting

☐ Recipients are notified in June.
**Endorsement:** (To be completed by the appropriate Principal/Supervisor)
Explain why this project should/should not be funded by the West Irondequoit Foundation:

________________________________________
Principal’s/Supervisor’s Signature

**Feedback to Requester:**
☐ Approved and forwarded to District Review Committee  ☐ Rejected and returned to requester

Rejected for:

________________________________________
Signature
Asst. Superintendent for Instruction

☐ Approved and forwarded to WIF  ☐ Rejected and returned to requester

Rejected for:

________________________________________
Administrator’s Signature / Review Committee

☐ Approved and funded  ☐ Rejected and returned to requester

Rejected for:

________________________________________
WIF President’s Signature