



GRANT APPLICATION INFORMATION

2017-2018 Application Deadlines

August 28, 2017
September 18, 2017
October 23, 2017
November 20, 2017
December 19, 2017
January 22, 2018
February 19, 2018
March 14, 2018
April 23, 2018

Foundation Meeting & App Review Dates

September 11, 2017
October 2, 2017
November 6, 2017
December 4, 2017
January 8, 2018
February 5, 2018
March 5, 2018
April 2, 2018
May 7, 2018

- ❖ Applications must include your signature and the signatures of the Department Chair and Principal. Please factor in the time it takes to obtain the required signatures. Late grants will **not** be accepted.
- ❖ The signed application must be submitted it via EMAIL to Piper Turner at pturner@fdlaw.com
- ❖ An electronic copy of this application is available at www.btwfoundation.net
- ❖ If you need help completing the application or have any questions, please do not hesitate to contact Piper Turner at pturner@fdlaw.com or Brenda Pipestem at toineeta@gmail.com
- ❖ After submission of an application, a member of the Foundation Board may contact you with questions or requests for additional information to assist the Board’s evaluation of your request. The failure to provide this information may result in a decision on the application being deferred.
- ❖ Do not incur expenses or agree to non-refundable obligations prior to notification that your application was approved. The Board rarely approves reimbursements.
- ❖ Property purchased using Foundation funds belongs exclusively to Booker T. Washington High School and must be placed in the school’s inventory for insurance purposes after it is purchased.

FOR FOUNDATION USE ONLY:

Grant No.: _____ ***Date Reviewed:*** _____

Approved/Denied/Tabled: _____ ***Amount approved:*** _____



2017-18 GRANT APPLICATION

Grants must be for a purpose that satisfies the mission of the Foundation:

The mission of the Booker T. Washington Foundation for Excellence is to support academic excellence for all students at Booker T. Washington High School.

Name: _____

Position: _____

Department: _____

Email Address: _____

Phone Number: _____

What are the best days/times to reach you: _____

Project Name: _____

Name of Student Activity Fund Account: _____

Amount Requested: _____

Have you posted this project (or a part of this project) on www.donorschoose.org? Yes ___
No ___

Please answer the following questions regarding your request. Use as much space as you need, either by typing directly into the Word document or by adding pages.

1. Please describe the project.
2. What is the budget for the project? Attach any bids, estimates, or other relevant documents.
3. If the total cost of the project is different from the amount of your grant request, please explain why you are asking the Foundation for this particular amount.
4. How many current BTW students will participate in this activity or benefit from this purchase?
5. What percentage of students funded by this grant are classified as Free/Reduced Meals eligible?
6. How much of the cost will each participant be requested to provide?
7. If this is a grant for a student activity, please list fundraising activities and amounts raised by students/parents. Grants for activities generally require fundraising by the students or parents.
8. Are there any other possible sources of funds available to you? If so, what are they? When do you expect to know whether these funds are available?

9. If only part of your request were to be funded at this time, please break down the request into smaller parts and prioritize them. (We understand that this may not apply to all requests.)
10. What is your funding timeline? Please let us know the date you need funding and if some of the funding is needed at different times.
11. Do you anticipate requesting funding from the Foundation in the future for a similar project? If so, is this the type of project that will likely result in an annual grant request?
12. If the grant request is for a competition, field trip, exchange trip, or professional development, how frequently do you intend to participate in this event? For example, during the four years that a student is at BTW, how often will he/she have the opportunity to participate in a similar event?

E-mail a copy of the completed application to Piper Turner at pturner@fdlaw.com.

 **Signature of Applicant

 Date

 **Signature of Department Chair

 Date

 **Signature of Principal

 Date

****BY SIGNING THIS APPLICATION, YOU ARE CONFIRMING TO THE FOUNDATION THAT THIS PROJECT IS SPONSORED BY BOOKER T. WASHINGTON HIGH SCHOOL AND COMPLIES WITH ALL APPLICABLE POLICIES, PROCEDURES AND GUIDELINES REQUIRED BY THE SCHOOL AND BY TULSA PUBLIC SCHOOLS FOR A SCHOOL-SPONSORED PURCHASE OR PROJECT OF THIS TYPE.**