

 \square supporting a literate Michigan citizenry of all ages \square

LITERACY GRANT APPLICATION

ADDI ICATION

I. APPLICATION) IN							
APPLICANT INFORMATION								
Project title:								
Requesting Organiza	ition:							
Initiative to be funded	d:							
Applicant/Contact person								
Title:	First name:		Middle initial:		Last name:			
Work Address:								
City:		State:				Zip Code:		
E-Mail Address:								
Work Phone:	F		Home/	/Cell F	Phone:			
Home Address:				I				
City:		State:				Zip Code:		
Current position or vo	olunteer respons	sibility:						
Years of experience in this position:								
Total number of years	s teaching (if ap	plicable):						
Certified for teaching Yes	Michigan?		Area and level:		vel:			
☐ Yes ☐ No Highest degree held:				Major Emphasis/Specialty:				
Current school/work location:				District/Agency:				
Immediate Supervisor (Title/Name):				Work Phone:				
Agency CEO/Superintendent/Highest-Ranking Admir (Title/Name):			ministrator	Work Phone:				
List any <i>professional</i> organizations in which you currently hold membership:								



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2. BUDGET

Brief budget narrative explaining how the funds will be allocated.					
Indicate below the total funding needed, the amount requested from LLF Michigan, and financial support you have from other sources. If no other funding is needed or anticipated, indicate that fact also with a zero.					
Total amount needed:					
Amount requested from LLF Michigan:					

Expense Items List all expense items appropriate to grant application.	Amount requested (From LLF Michigan)	Other funds available	TOTALS	Other funding Source(s)
Fees, Registration, (e.g., conference registration, admission, etc)				
Books				
Materials				
Rental (bus, equipment, etc.)				
Technology				
Substitutes				
Other (no mileage)				
Totals				



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3. ASSURANCES

THIS PAGE MAY BE SUBMITTED ELECTRONICALLY. **NOTE**: ONE COPY MUST BE MAILED WITH ORIGINAL SIGNATURES IN BLUE INK.

If my application is approved I understand that I will:

- a. complete the grant activity within eight months from the notification of the grant award (or obtain an extension in writing from LLF Michigan);
- b. provide a one-page update midway through the grant implementation
- c. complete the evaluation at the conclusion of the project to the specifications required by the grantor and by the deadline established, or lose funding, and must include: evidence of payment for purchase of materials; e.g. cancelled check number, receipts, etc.; photos of the project sent electronically, including use of book plate if appropriate, to show implementation of activity; written evaluation using the format provided on the LLF Michigan website entitled GRANT EVALUATION see Instructions and Format. Data and evidence of implementation must be included (additional documents can be attached).
- d. notify the LLF Michigan contact at 906-228-5959 immediately if unable to accept this award or continue with the activity. <u>NOTE</u>: If your position changes, it is imperative that you notify us immediately. If you are unable to complete your project or activity, you are required to return the project funds immediately.

I understand that as a recipient of the LLF Michigan Grant, photos, videos, audio recordings and quotations may be used in publications and reports about the grant program. I further understand that members of the news media may be invited to cover the activity or event, and may take photos, make videos and audio recordings and obtain quotations. I grant permission for the use of such materials for the promotion of the project and the Literacy Legacy Fund of Michigan without financial remuneration. I also grant to LLF Michigan the right to edit, use and reuse said products for non-profit purposes including use in print, on the internet, and all other forms of media. I waive any right to inspect or approve the finished photographs or printed or electronic matter that may be used. I hereby release the Literacy Legacy Fund of Michigan from all claims, demands, and liabilities whatsoever in this regard.

Applicant

Signature (Required):	Date:
Printed name:	
Agency CEO, Superintendent or highest-	ranking Administrator
I have reviewed this grant request and ap	
Signature (Required):	Date:
orginatare (regarda).	Datc.



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4. GRANT NARRATIVE FORMAT¹

I. PURPOSE AND OBJECTIVES TO BE ACCOMPLISHED

- 1. <u>Describe</u> in a few sentences the purpose/ intent of this literacy-related project, event, or professional learning activity.
- 2. <u>List 2-3</u> tangible objectives you expect to accomplish during the life of the grant. (Cite these in the evaluation.)

II. STATEMENT OF NEED

1. <u>Explain</u> how/why this grant will make a difference in some way and why you need funding. Describe your organization, the population to be served, and other pertinent demographic information.

III. IMPLEMENTATION AND IMPACT

- 1. <u>Specify the step-by-step</u> process you will follow toward accomplishing your objectives.
 - a. Describe the timeline for implementation. Identify the expected completion date.
- 2. <u>State</u> the approximate number of students, professionals, parents, and/or citizens that will be served.
- 3. Explain how the impact of this project will be sustained.

IV. ASSESSMENT AND EVALUATION

1. <u>Explain in detail</u> how you will monitor progress toward your objectives. <u>Describe</u> how you will know you have <u>attained each objective</u> and what tangible evidence you intend to present. (This information should be helpful in completing the evaluation at the conclusion of the grant-period.) If you plan to monitor the objectives through survey results, attach proposed survey with application materials.

V. SHARING RESULTS AND CREDITING LLF MICHIGAN FOR PROVIDING ASSISTANCE

- 1. Specify the way(s) you will share the results with others.
- 2. <u>List at least two means</u> you will use to recognize LLF Michigan in providing assistance with your project, event, or professional learning.

¹ In a **maximum of three pages** (using no less than 10-point font size) use these **headings in bold print**.