

Rockford Public Schools #205 Grant Application **PRE**-Approval Form

*Employees of the Rockford Public Schools are to obtain approval for development and submission of grant applications **prior** to writing and/or submitting any such application to a potential grantor on behalf of RPS 205. This form should be used to request prior approval. This same form is intended for use by others who seek Rockford Schools' collaboration or other support for pursuit of grants. Providing all information will facilitate review of this request. Please submit Pre-Approval Forms to: I & I Department, Rockford Public Schools, 501 Seventh Street, Rockford, IL 61104 or fax to : 815.489.2645. Please feel free to call with any questions: 815-489-7289.*

Project Title: _____ **Project Start Date:** _____ **End Date:** _____

Submitted by: _____
(Grant Coordinator) (Name) (Position) (Date)

School/Department: _____ **Telephone:** _____ **Email:** _____

Principal/Supervisor Approval (signature): _____ **Date:** _____

GRANT INFORMATION:

Pre-application Deadline (if required): _____ **Final Application Deadline:** _____

TYPE OF GRANT: Check ALL that apply

State Entitlement/Flow-through Competitive Other (explain): _____
 Federal Continuation Non-Competitive _____

Name of Grant: _____ **I.D. # if any:** _____

Funding Agency: _____

Funding Amount Requested: \$ _____ **Number of Funding Years** 1 2 3 4 5

Summary of Project/Proposal: (Use additional paper as needed)

Schools, Grade Levels, Target Groups, Departments, Involved:

Community Partner(s) Involved: _____ **Yes** _____ **No** If so, please list:

Relationship to School and District Improvement Plans:

FISCAL IMPACT:

Fiscal Agent: RPS #205 Other (list) _____

Direct Costs to District: \$ _____ Matching/In-Kind (services/goods) Costs to District: \$ _____

What will be the source of District Match or In-Kind Resources?

Does the grant require the program to be sustained after the grant ends? If so, how will the grant be sustained?

DISTRICT IMPACT INFORMATION:

Additional District resources that the District/School site must commit:

Additional Requirements?	Yes	No	Brief Description of Additional Requirements
School Site staff			
Central Office staff			
Facilities Department			
Technology support			
Evaluation staff			
Professional Development			
Other (describe)			
Other (describe)			

DO NOT WRITE BELOW THIS LINE

For I & I Department Use:

Received by: _____ Date: ____/____/____

Reviewed by Executive Director: _____ Date: ____/____/____

STATUS: Approved
 Not Approved

Date notified contact person: _____
By: _____