



CALALLEN ISD

AUTHORIZATION FOR GRANT APPLICATION

In accordance with Calallen ISD Board Policy CB (Local), all District grant applications must be reviewed and approved by the Superintendent prior to submission. Any Calallen ISD employee seeking external funding through grants or awards—other than those from the Texas Education Agency (TEA) or the Calallen Education Foundation (CEF)—must complete this form and obtain all required approvals before applying to the granting agency. The Superintendent will evaluate each proposal to ensure it aligns with the District’s mission, goals, and strategic plan; does not impose restrictions on school programs; and does not create unreasonable or hidden costs or obligations for the District. The Superintendent reserves the right to deny any grant application at any time and for any reason.

APPLICANT INFORMATION

<i>Name:</i>	
<i>Campus/Dept:</i>	
<i>Position:</i>	

GRANT INFORMATION

<i>Name of Grantor Agency:</i>	
<i>Title of Grant Opportunity:</i>	
<i>URL to Grant Information:</i>	
<i>Deadline to Apply for Grant:</i>	
<i>Describe any grant reporting requirements:</i>	

PROJECT INFORMATION

<i>Title of your proposed project:</i>	
<i>Description of your proposed project, including an explanation of need, goals/objectives, description of activities, instructional strategies, and alignment to TEKS and/or CIP.</i>	

<i>Description cont.</i>	
<i>Describe the student groups that will benefit from this project:</i>	
<i>Describe the employees, teams, departments, schools, and/or groups that will have a role in implementing this project:</i>	

MONETARY INFORMATION

<i>Total amount of grant request:</i>	
<i>Does this grant require matching funds?</i>	No Yes, list the required match and describe the proposed funding source:
<i>When the grant period is over and funds are spent, will you continue this project?</i>	No Yes, list the proposed funding source for continuation:

REQUIRED ATTACHMENTS

- Draft copy of the grant application
- Price quotes for items to be purchased if the grant is awarded (internet printouts are acceptable)

ACKNOWLEDGEMENT STATEMENT

By signing this form, the applicant affirms that all information provided is complete and accurate, and that the final grant application will reflect only the ideas and plans outlined in this document. The applicant understands that any grant funds awarded will be disbursed to Calallen ISD, that all purchases made with grant funds must comply with District purchasing procedures, and that all items purchased with grant funds are the property of Calallen ISD.

By signing this form, the campus or department administrator confirms that they have reviewed and discussed the proposed project with the applicant and approve it based on the ideas and plans documented herein.

Signature of Applicant _____ **Date** _____

Signature of Campus/Dept. Administrator _____ **Date** _____

SUPERINTENDENT DECISION

Approved
Denied Reason for denial:

Signature of Superintendent _____ **Date** _____