FORM D

2026-2027 Request for Grant: Intent to Apply

District procedures require campuses and departments to notify Associate Superintendent, Strategic Innovations Officer, and the Finance Department of their intent to apply for grant funding prior to the development and submission of any grant proposal. *Email completed form to Eleticia.Lopez@gpisd.org for* Associate Superintendent/ Strategic Innovations Officer/*Finance Approval.* **Please include all additional information you have on the grant with the submission of this form.**

School or Department: _____ Today's Date: _____

Source of Potential Grant Funds: ☐ State ☐ Federal ☐ Unknown, seeking grantor

☐ Corporate or Private Foundation ☐ Other, specify: _____

Amount of Funds Requested: $_____ Grant Due Date: _____

Does Private Non-Profit Equitable Services apply to this grant? ☐ Yes ☐ No *(please check one)*

- If YES is selected, please initial that you have reached out to Private Non-Profit Schools within our boundaries regarding participating in this program _____.

Does this grant have matching requirements? ☐ Yes ☐ No *(please check one)*

- If YES is selected, please provide details below on the matching requirement:
  _____

Funds will be used for: *(Check all that apply)*

☐ Curriculum Instruction ☐ Math/Science ☐ Fine Arts ☐ Innovation/Reform Effort

☐ Social Studies ☐ Technology ☐ P.E./Athletics

Other, specify: _____

Brief description of school/department need: _____

_____

Name of Grant: _____

Program Manager Signature: _____

Program Manager E-mail and Phone Number: _____

Grant Preparer Signature: _____ Date: _____

****Completion of this form does not obligate the submission of any grant application.*

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CDFA or RFA #: _____ Matching Requirements: _____

Personnel Requested: _____ Amount Requested: _____

☐ Approved ☐ Denied ☐ More information requested ☐ Finance review/approval: _____

Associate Superintendent/Designee Approval: _____ Date: _____

Strategic Innovations Officer/Designee Approval: _____ Date: _____