2026 – 2027 GRANT APPLICATION FORM – COVER PAGE

SUBMISSION DEADLINE: FRIDAY, JANUARY 29, 2027

Email completed applications in their original format *(not a scanned version)*
to kbickerstaff@shermanisd.net
AND
Submit a paper copy of the Cover Page with required signatures
to: Kathy Bickerstaff, SEF-Admin Bldg

*****Review Guidelines for Grant Application before completion*****

Project Title: _____
Campus Name – Description, i.e. Wakefield – Science Bundle Kits

Campus Name(s) _____ Project Total: $_____

Subject(s) _____ Target Population:
Students *(Number to be served)*: _____
Grade Levels _____ Staff *(Number to be involved)*: _____

Anticipated date of implementation: _____ Life of Project, in years: _____
(if one-time use, i.e. field trip, reflect 1 yr)

Does this project require pricing or support from the Technology Dept? ☐ Yes* ☐ No
If yes, submit the grant proposal to Kathy Bickerstaff no later than January 22, 2027.

Applicant(s):

Print Name *(If multiple names, list Project Director first)*	Signature
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
Project Director email address:	_____

Principal's Signature: _____ Date: _____

***Questions**: Kathy Bickerstaff, Executive Director 903.891.6431 or kbickerstaff@shermanisd.net*

SHERMAN EDUCATION FOUNDATION
ENHANCE ▪ ENRICH ▪ EDUCATE

2026 - 2027 Grant Application Form

(to be funded for implementation during 2027-2028)

PROJECT TITLE: _____

Project Description & Purpose
How will this project benefit student achievement? How will it enhance and enrich the educational experiences of your students?

Statement of Need
What specific needs will this project address?

Project Objectives
What accomplishments are expected through this project? List at least three program objectives written in measurable terms.

Project Evaluation
How will the success of this project be determined/measured?

Budget: *Provide vendor names and a detailed itemization of all costs and materials. Estimates are not acceptable. If possible, attach quotes or provide website link to pricing information. Include specific information for materials and equipment, sources, costs, transportation, shipping, etc.*

Categories	**Other Funding**	**SEF Funding**
Contract Services		
Supplies and Materials *(include vendor weblinks and all details)*		
Transportation, i.e. Field Trip, etc. ___ bus(es) X ____ round-trip miles X $2.50/mi = $ ___ driver(s) X ____ hours X $22.50/hr = $		
Other		
Total		

As a reminder:

- Grant recipients must submit a completed Project Evaluation to SEF by May 24, 2028.
- Failure to provide the Project Evaluation will prohibit the applicant(s) from submitting future grant proposals.
- Grant recipients should assist SEF in documenting the project by providing photos and other information as needed for publicity.

Technology Request within Grant Proposal

In alignment with Sherman ISD Purchasing Policies, the Sherman Education Foundation requires that all grant requests that require support from the Technology Dept be reviewed by the Sherman ISD Director of Technology for compliance and pricing prior to submission to SEF.

Input from the SISD Technology Department is critical as it applies to:

1) Assurance of best pricing through approved vendor(s) and possibility of bulk purchase
2) Consistency of quality and ability to warranty product, if necessary
3) Sufficient facility Wi-Fi infrastructure to implement enhanced technology
4) Adequate electrical capacity of location and/or facility
5) District alignment of technology relating to grades and campuses

Quotes will only be accepted if prepared by or approved by SISD Technology Director.

Technology Department Review

On behalf of Sherman ISD and as Director of Technology, I have reviewed the grant proposal to the Sherman Education Foundation entitled _____.

____ The grant proposal is approved and supported as written with no changes.

____ The grant proposal is approved and supported with the following stipulations:

_____

_____

_____

____ The grant proposal requires additional technology support prior to approval, as outlined:

_____

_____

_____

___ The grant proposal is not approved by the Director of Technology for the following reasons:

_____

_____

_____

I have reviewed the grant proposal and confirm the selection listed above as it pertains to alignment with the Sherman ISD Technology Strategic Plan, as evidenced by my signature below.

_____ _____

Adam Patterson, Director of Technology Services Date