**Logo, company name

Description automatically generated**

Grace Pampel

Educational Impact Grant

(High Schools Only\*\*)

Pampel Grant Application Process opens February 1, 2023 for high schools in Jasper, Newton, and Benton counties and Tri-County in White County.

-Applications must be e-mailed to the Jasper Newton Foundation by March 15, 2023. Please e-mail the completed application to [ahughes@jasperfdn.org](file:///\\NAS\Documents\2022%20Programming\Pampel%20Grant%202022\ahughes@jasperfdn.org)

-Projects must be implemented in the 2023-2024 school year.

-Funds will be awarded at the end of May 2023.

-Selected applicants will be required to spend their funds by and complete a final report by 5/31/2024. (Multiple-year grants will have their own individual reporting schedule).

- Please TYPE your application – no handwritten applications will be accepted.

*\*\* Designed for enhancement of high school programming, application may include direct/indirect effects on lower grades.*

**Grace Pampel Educational Impact Grant Application Guidelines**

**Purpose:**

This special grant is to address the broad educational needs of and contribute to improving the quality of education in the high schools in Jasper, Newton, and Benton Counties and Tri-County in White County for this and future generations.

**Eligibility:**

* High schools in Jasper, Newton, and Benton Counties and Tri-County in White County.
* Designed for enhancement of high school programming, application may include direct/indirect effects on lower grades.
* Grant amounts range from $10,000-$15,000 but exceptional projects may receive up to $25,000.
* Grants may be for programs that are one to three years in duration, with the second- and third-years contingent upon annual reviews and reappraisal.
* Grants will likely not exceed $25,000. This includes the culmination of programs one to three years in duration.

**Application Requirements:**

* Grant Application Cover Sheet (includes project leader, other co-leaders, principal’s commitment with signature and any department contacts needed for completion of this project)
* Project Purpose and Overview
* Project Details (includes anticipated student outcomes, quantitative and qualitative measures used to determine impact on students, etc.)
* Itemized Budget (how the money will be spent with vendors, prices, and category).
* Please provide 2 quotes for the equipment that is being purchased.

**Reporting and Evaluation for Funded Projects:**

* An online evaluation (link will be emailed) and must be completed by May 31, 2024.
* Submitting photos of your project is required (please attach to the online evaluation). Please make sure all photos have appropriate photo releases.
* Grantees are required to promote Jasper Newton Foundation grants by displaying awarded plaque in their school.

**Special Considerations:**

* Salaries and per diem travel costs for individuals may not exceed 30% of the overall grant budget
* Grants will NOT be awarded for items that are already available through campus, district, state, and federal funding.

**GRACE PAMPEL EDUCATIONAL IMPACT GRANT APPLICATION**

**COVER SHEET 2023-2024**

The Grace Pampel Educational Impact Grant believes that investing directly in high school teachers and staff is one of the best ways to improve student learning, student engagement and student retention. The Pampel Grant provides high school employees with resources to expand and enrich the academic environment which can provide students with powerful learning experiences that will significantly impact their academic achievement and success. **DUE TO JASPER NEWTON FOUNDATION BY MARCH 15, 2023.**

|  |  |  |
| --- | --- | --- |
| **Project Purpose:** |  | |
|  | | |
| **Amount Requested:** |  | |
|  | | |
| **Name of High School:** |  | |
| **School Address:** | | |
| **School Phone:** |  | |
|  | | |
| **Project Leader** |  | |
| **Name:** | **Email:** | **Phone:** |
| **Title:** |  |  |
|  | | |
| I understand that these funds are awarded to support my work, and to my knowledge, I plan to be in my current position for the 2023-2024 school year. If that changes, I will contact the Jasper Newton Foundation. I also understand that all items purchased with grant funds become the property of my campus and must remain on said campus. | | |
| **Project Leader’s Signature** |  | |
|  | | |
| **Co-Project Leader (if applicable):** |  |  |
| **Name:** | **Email:** | **Phone:** |
| **Title:** |  |  |
|  |  |  |
| I understand that these funds are awarded to support my work, and to my knowledge, I plan to be in my current position for the 2023-2024 school year. If that changes, I will contact the Jasper Newton Foundation. I also understand that all items purchased with grant funds become the property of my campus and must remain on this campus. | | |
| **Co-Project Leader Signature (if applicable):** | | |
|  | | |
| As Principal, I have reviewed the attached budget and certify that this project would be an excellent use of Grant funds and supports our campus goals and improvement plan. There are currently no plans or resources to purchase these items through our campus budget or by other means. Additionally, I will help ensure that the goals and requirements for the project are met. | | |
| **Principal’s Signature** | | |
| **Principal’s Email:** | | |
| As the Head of IT, I certify that there are no plans or resources to support these items through our budget or by other means. I have provided verbal support in the planning of this project and will assist in supporting the Project Leader in implementing the required technology purchased through this Grant. | | |
| **Head of IT Signature (if applicable):** | | |
|  | | |
| **No Technology is needed ( )** |  |  |
|  | | |
| **Have you applied for funding from any other agencies? ( ) No ( ) Yes**  **If yes, name of organization:** | | |

**PROJECT OVERVIEW**

**Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**This project is a/an** ( ) new project ( ) expansion of an existing project

**Project Timeline:** ( ) Fall 2023 ( ) Spring 2024 ( ) Entire 2023-2024 School Year

**Primary Content Area:** ( ) Math ( ) Science ( ) ELA ( ) History ( ) PE/Wellness

( ) Fine Arts ( ) ESL ( ) Special Needs ( ) Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project Involves:** ( ) Single classroom ( ) Multiple classrooms ( ) Grade level

( ) School-wide ( ) Cross-curricular ( ) Multiple Schools\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Timeline:**

Order materials date: \_\_\_\_\_\_\_\_\_\_ Expected start date of project: \_\_\_\_\_\_\_\_\_\_\_\_\_

Once started, is the project ongoing? ( ) Yes, how long?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) No, provide end date\_\_\_\_\_\_\_\_\_\_\_.

**PROJECT SUMMARY:** Please provide a short and precise statement of the problem or need that your project is designed to address. Why is it significant in the educational situation of the students in your high school? How do you know that something can be done to improve the situation? Why is the grant needed? If the issue cannot be resolved without this grant, make the case. Use the space below for your summary. You **MUST ADDRESS** the **sustainability** of your project in this section.

**PROJECT DETAILS (limit to this page only)**

**Anticipated student outcome in the area(s) of Attendance, Engagement, Social Emotional, and Academic Achievement demonstrating direct student impact (list up to three):**

**1.**

**2.**

**3.**

**What methods and activities will be used to achieve those outcomes?**

**How will you measure the impact of the project? (Qualitative and quantitively in the area(s) of Attendance, Engagement, Social Emotional, and Academic Achievement. (If Academic Achievement be sure to include the school and state assessments that will be used to assess impact).**

**How will you celebrate and demonstrate your students’ achievements at your campus?**

**BUDGET REQUEST**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item** | **Budget Category**  **(i.e. books, supplies, equipment, software…)** | **Can be Reused?**  **Yes/No** | **Vendor**  **Attach copy of item shown in catalog or online (please e-mail this quote, etc. along with the application to** [**ahughes@jasperfdn.org**](file:///\\NAS\Documents\2022%20Programming\Pampel%20Grant%202022\ahughes@jasperfdn.org)**)** | **Quantity** | **Total Cost including shipping** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Total Amount Requested** | | | |  | |

**Total number of students who will be directly impacted by this grant annually? \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Budgeted cost per student participating in project (total amount $/# of students)?\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project Budget Approval: Signatures are needed from the following:**

**Principal:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project Leader:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**IT/Technology (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**