

PROPOSAL FOR FUNDING TO THE WEST IRONDEQUOIT FOUNDATION

This application must be signed by the applicant's supervisor/principal and submitted to the office of the Asst. Superintendent for Instruction by March 15.

Project Title:
Person(s) Proposing the Project:
Description of Project: (See criteria on page 3)
A. Purpose(s)
B. Project Target Group:
C. Student Learning: Describe in detail how student learning will benefit from this proposal. What need is addressed? What learning activities will result from it?
D. Number of students to be served by this project:
E. Other:

F. Funding: List the funds required to support this project.	
<u>Description</u>	<u>Amount</u>
1. Equipment (list each item)	
2. Supplies	
3. Renovations	
5. Renovations	
4. Other	
	Total:
If your grant request is for technology or audio visual equipmed Media Services Coordinator (336-2967) or the District Director (2976) to review your proposal to ensure that you have listed at	or of Technology (336-
components and found the best pricing to make your project a	success.
W. C. C. C. L. (D. C. C. L. L. C.	Date
Media Services Coordinator / Director of Technology signa	nture
G. Explain why funds for this project are not included in the re	egular budget:

ADDITIONAL INFORMATION TO SUPPORT PROPOSAL

West Irondequoit Foundation

Grant Criteria

Explain why this project should/should not be funded by the	
	Principal's/Supervisor's Signature
Feedback to Requester: Approved and forwarded to District Review Committee	☐ Rejected and returned to requester
Rejected for:	
	Signature Asst. Superintendent for Instruction
☐ Approved and forwarded to WIF	☐ Rejected and returned to requester
Rejected for:	
	Administrator's Signature / Review Committee
☐ Approved and funded	☐ Rejected and returned to requester
Rejected for:	
<u>-</u>	WIF President's Signature