

NEF GRANT APPLICATION WORKSHEET

Use this document to help plan the content of your grant proposal. The following questions are on the online application.

PRIMARY Contact Person's Name *

If the NEF Grant Committee needs further clarification on this proposal, this is the person to be contacted. Please include first AND last names.

Email Address of Contact Person *

Proposal Application Team

If there is more than one person collaborating and implementing this grant, please list all the names here (including the primary contact person's name).

School or Organization *

Please check all schools who will be DIRECTLY impacted by this grant proposal.

- | | |
|-----------------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Early Childhood Education Center | <input type="checkbox"/> Novi Meadows |
| <input type="checkbox"/> Deerfield Elementary | <input type="checkbox"/> Novi Middle School |
| <input type="checkbox"/> Village Oaks Elementary | <input type="checkbox"/> Novi High School |
| <input type="checkbox"/> Orchard Hills Elementary | <input type="checkbox"/> Career Prep High School |
| <input type="checkbox"/> Parkview Elementary | <input type="checkbox"/> Adult Transition Center |
| <input type="checkbox"/> Novi Woods Elementary | <input type="checkbox"/> Other |

Building Administrator *

First and Last Name

Building Administrator's Email *

Most emails are case sensitive. When your grant is submitted, an automatic copy of your grant proposal will be sent to your administrator by email.

Title of Grant

Summary Description *

Please be concise and detailed with your summary. Do not list.

How would this project align with the primary mission of the NEF? *

Please also include how your grant proposal aligns with the "Becoming Brilliant Fund" by building lifetime leadership skills and/or supports social-emotional learning /wellness for students.

What is your expected implementation time frame? *

Please remember that grants should be implemented from the receipt of the grant monies to the end of the following school year, 2018-2019. A majority of the implementation should happen within that time frame. Please include the approximate

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launching date and how often beneficiaries (i.e students) will be engaged with the proposal. For example, if a teacher received grant monies to purchase resources related to social emotional learning, approximately how many hours a week would students be using those resources? Once a week? Daily?)

What other information would you like the NEF Grant Committee to consider about your grant proposal?

What is the requested amount?

What materials are required for this proposal? *

Please include cost estimates for ALL items and specific sources for those not readily available. (If possible, please include website links.) Be detailed with your answer.

Can you modify your request if funds are not available to fully fund your application?

Yes or no

NEF Grant Committee would like to follow up with grant recipients in two ways- reflecting on the effectiveness of a grant proposal and promoting the NEF Grant process to our community.

How will you measure the effectiveness of your grant proposal? *

Some examples are pre/post surveys, district assessments, or unit tests. BE SPECIFIC and detailed.

I will provide feedback to the NEF Grant Committee on the effectiveness of the grant proposal. *

Yes or No

I am willing to do the following to help promote the NEF's Support of Novi Community School District and the NEF Grant Process. *

Check all that apply.

- Invite an NEF Board Member to visit and observe the Grant Proposal implemented.
- Provide photos and description for the Awarded Grants Photo Boards to be showcased at the annual NEF Green Gala.
- Other _____