OAK RIDGE SCHOOLS GRANT APPLICATION PROCESS

Preliminary Application Review

Complete this form, signed by building principal, and send it with a copy of the grant to the Teacher Center. Name **Date** School **Position Type of Grant** State Other, Please Specify: Federal **Title of Grant Grant Committee** (Who will write and/or contribute to the grant?) **Description of Grant Grant Submission Deadline Total Monetary Amount of Grant School System Impact/Obligation** - Personnel (Time, Requirements) - Financial (Matching Funds, In-kind. Etc) Mark all items that apply: Monetary amount is equal to or greater than \$5,000 Includes a school system financial obligation Requires superintendent signature/district approval Principal Approval Date Dr. Kelly Williams, Grants Administrator Date **PLEASE NOTE:**

*If none of the above items are marked the grant application may be submitted to the granting agency once a signed copy of this form has been received by applicant.

OR

^{*}If any of the above items are marked, do not submit the grant application to granting agency until approval from the Teacher Center has been received.