



### Grant Application Deadlines

Please submit your grant by...	...for consideration at
Monday, Sept. 20, 2021	October 2021 Board Meeting
Monday, October 25, 2021	November 2021 Board Meeting
Monday, November 22, 2021	December 2021 Board Meeting
Monday, December 20, 2021	January 2022 Board Meeting
Monday, January 24, 2022	February 2022 Board Meeting
Monday, February 28, 2022	March 2022 Board Meeting
Monday March 28, 2022	April 2022 Board Meeting
Monday April 25, 2022	May 2022 Board Meeting (End of Year Trips & Celebrations!)
Monday, May 30, 2022	June 2022 Board Meeting (Summer Programs and Back to School)

Questions? Call 518-417-2107 or email [albanyafe@gmail.com](mailto:albanyafe@gmail.com)



# INNOVATION GRANT APPLICATION

All grant applications must enhance opportunities for students to learn, grow and succeed.

AFE Innovation Grants are intended for multi-school or large-scale projects with project budgets of \$2,500 or more that introduce new ideas and resources to the District. Innovation Grants may also support pilot programs with a plan for later expansion. Innovation grants for technology purchases are not encouraged. The participation of a community partner in Innovation Grants is highly recommended, but is not required. You are encouraged to contact AFE at 518-417-2107 or [albanyafe@gmail.com](mailto:albanyafe@gmail.com) to discuss your proposal before submitting it.

## Part I: General Information

Application Date: \_\_\_\_\_

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

School(s) impacted: \_\_\_\_\_

Planned Date(s) of Project: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Who is the "sparkplug," i.e., leader, for the project? \_\_\_\_\_

Is this person an Albany City School District employee?      Yes      No

If no, please identify a school district employee who will help coordinate the project:

(There must be a school district employee on the project team.) \_\_\_\_\_

Sparkplug E-mail Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

District Employee Email Address (if different): \_\_\_\_\_

Which other District staff will be involved with this project? \_\_\_\_\_

Is this a new project for your building?      Yes      No

Is this, as far as you know, new to the district?      Yes      No

## Expected Numbers of Participants:

# Students (along with Grade Level(s)): \_\_\_\_\_

\_\_\_\_\_ # Teachers      \_\_\_\_\_ # Families      \_\_\_\_\_ # Community Members

## Project's Focus/Impact (select all that apply):

\_\_\_\_\_ STEAM ( \_\_\_\_\_ Science      \_\_\_\_\_ Technology      \_\_\_\_\_ Engineering      \_\_\_\_\_ Arts      \_\_\_\_\_ Math)

\_\_\_\_\_ Social Sciences      \_\_\_\_\_ Physical, Social and Emotional Well-Being      \_\_\_\_\_ Language Arts

Grant recipients will be provided with a project evaluation and required to complete and submit it within one month of completing their project. We also invite submissions of event photos and testimonials to include on the AFE website at [www.thealbanyfundforeducation.org](http://www.thealbanyfundforeducation.org).

**Part II: Project Description**

Describe the activities that will take place as part of this project and outline the full project timeline. You may use a separate document to answer these questions.

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**Project Goals:** Describe your reason for proposing this project and the impact you hope the project will have on these areas of student learning and development. How will this project enhance students’ ability to learn, grow, and succeed?

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**Project Evaluation:** How do you plan to measure the degree to which you've achieved your goals in these areas?

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Please describe any connections between this project and other ongoing District activities that will enhance the impact of this project on student development:

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**Part III: Community Partners**

It is recommended, but not required, that Innovation Grants involve community partners. Community partners are community members, businesses and/or not-for-profit groups. They are involved parties that will help make this project successful by contributing their time and/or resources. They are not vendors receiving payment unless significant in-kind contributions are involved. Involving community partners in our schools provides opportunities for our community members to be engaged in our positive activity in our schools, and opens students' horizons to the resources around them.

Name of Community Partner #1: \_\_\_\_\_

Has this partner been involved with the District previously?      Yes                  No

Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name of Community Partner #2: \_\_\_\_\_

Has this partner been involved with the District previously?      Yes                  No

Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name of Community Partner #3: \_\_\_\_\_

Has this partner been involved with the District previously?      Yes                  No

Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

What role will these community partners play in this project or what commitments have been made or are expected, from these partners? What prior involvement, if any, have they had with your school/the District?

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**Part IV: Project Funding**

Will AFE funding help you leverage additional funds from other sources for this project?    Yes    No

Please explain: \_\_\_\_\_

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AFE Funding cannot support projects indefinitely. Our goal is to nurture new initiatives and then see them continue with support from others, either the school district or external funders. If this request is for a pilot or ongoing project, how do you intend to sustain and expand it?

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If project funds are paid to the CSDA, all district purchasing regulations must be followed. Any funds not used for grant project must be repaid to AFE. Documentation of purchases may be requested.

Check payable to: \_\_\_\_\_

**Project Budget**

Project Expense Category	Expense Detail (number of students /cost, supplier, etc.)	AFE Grant Contribution	Other Funding if Applicable (Please identify amount, source and cash/in-kind)
Admission/Tickets			
Books (for in-school use)			
Books (student takehome)			
Event Food			
In-School Presentation/Author Visit			
Musical Instruments			
Professional Development Programs			
Additional teacher/TA wages			
Student Transportation			
Supplies (one-time use)			
Supplies (ongoing use)			
Other Expenses (please describe)			

**I believe this project will enhance opportunities for students in our district to learn, grow, and succeed, and will support the project sparkplug in carrying it out.**

Supervising Administrator’s Name: \_\_\_\_\_

Supervising Administrator’s Signature \_\_\_\_\_

Please return this application to [AlbanyAFE@gmail.com](mailto:AlbanyAFE@gmail.com) (preferred) or mail to PO Box 3110, Albany, NY 12203.

The Grants Committee will consider grants each month; please see schedule of application dates.