RIVERVIEW HIGH SCHOOL FOUNDATION

2017 - 2018 CLASSROOM ENHANCEMENT GRANT PROGRAM

Purpose

The Mission of the Riverview High School Foundation is to provide funds for the enhancement of education when no other funding sources are available. Each year, the Foundation will consider grant requests from Riverview High School faculty members for materials or programs that are deemed worthy and meet specific priorities. These priorities may change from year to year depending on school initiatives. For the 2017-2018 school year, the priority continues to center on improving student achievement at RHS.

CLASSROOM ENHANCEMENT GRANT GUIDELINES FOR APPLICATION:

- 1. The deadline for applications is Thursday, September 14th (2017).
- 2. The Foundation Grants Committee, in conjunction with the RHS Principal, will review all applications and make the grant selections.
- 3. Completed forms must be sent via e-mail to Cyndi Forgeur, Foundation Coordinator.

foundationcoordinator@rhsfoundation.org

Late applications may not be included in the selection process.

IMPORTANT: If you do not receive a confirmation e-mail from the coordinator within one day please resend your application!

- 4. Questions may be directed to Cyndi Forgeur, Foundation Coordinator. (telephone – 376-7877 or via e-mail: RHSFoundation@verizon.net)
- 5. A brief presentation to the Foundation or fellow-faculty members may be required.
- 6. Attach additional sheets if necessary.

Application form requirement:

Specific objectives for classroom application.

RIVERVIEW HIGH SCHOOL FOUNDATION

<u>2017 - 2018</u> **CLASSROOM ENHANCEMENT GRANT APPLICATION**

NAME:	DATE:
DEPT/SLC:	SUBJECT:
	escription: (specifically, what are you going to purchase)
Attempts to obtain these n including amounts that were a	naterials or funding from other sources: (List all attempts for funding awarded and explanation as to why on those that were denied)
Have you been able to proc	cure any matching funds?
List any specific goals and o inter-departmental sharing	bjectives for this Grant: (Include # of students / classes affected; potential, etc.)
Describe the lasting impact	of this Classroom Enhancement Grant:
	Budget
Total amount requested: \$_	Total cost of Enhancement: \$
Signature of applicant:	Date:
Please return by e-mail to C	Cyndi Forgeur – foundationcoordinator@rhsfoundation.org
Deadline for	application, Thursday, September 14, 2017
Approval of RHS Principal ar	nd Grant Committee:
Date Received:	Date Approved: