



Funding  
Catholic  
Education

## TEACHER/CURRICULUM DEVELOPMENT GRANT APPLICATION

### COVER SHEET & APPLICATION

#### Questions/Contact/Mail:

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**Application Due Date: June 1**

**Notification Date: July 1**

**For School Year: 20 - 20**

#### Submission Requirements

Submit via email (PDF) or hard copy.

If you submit by hard copy, please provide one (1) original and five (5) copies of entire grant request.

**DO NOT FAX, USE STAPLES, PUT IN BINDER OR USE ANY TYPE OF COVER. PAPER CLIPS ARE OK.**

**The cover sheet and application must be typed or completed in Fill-In PDF format.**

Project Title: _____	
School: _____	Group: _____
Address: _____	City: _____ Zip: _____
Phone: _____	Website: _____
Contact Person: _____	Title: _____
Email: _____	Phone: _____
Amount Requested: _____	Total Cost of Project: _____
Project Period: Start date: _____	End date: _____
Month Day Year	Month Day Year

What area does your project fall under - Teacher Development OR Curriculum Development?

◇ Teacher Development: Area: \_\_\_\_\_

◇ Curriculum Development: Science Math STEM Religion Social Studies  
Please only choose one - the primary curriculum focus

Technology Art/The Arts Other: \_\_\_\_\_

Principal Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Application Instructions:** Complete the following questions of the application on paper provided or using pdf fill-in online. Application must be typed (minimum type size of 10pt.) Layout and spacing must remain the same, and not exceed the space and pages provided. Please do not place application in a binder/cover or fax the application.

**We have approximately \$20,000 available for all grants. The Augustine Educational Foundation traditionally does not fund more than 50% of the total cost of the project. Restrictions: Monies are NOT available for building improvements, construction/capital campaigns, furniture, equipment, technology hardware and teacher stipends. If you have questions about your grant, call Tonya Stevenson at 808-203-6748.**

<b>Project Information</b>
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**A. Describe your project.**

**B. How will the project improve the curriculum at your school/group?**

**C. Where does the project fit into the general improvement plan for your school?**

**D. Estimate the number of teachers, students, staff, community people, etc., who will benefit from this project?**

## Project Budget

A. List All Project Costs by Item and Amount:

Total Cost of Project: \_\_\_\_\_  
\*Should be same amount as  
Total Cost of Project on Cover Page

B. List ALL Funding Sources and/or Income *(List Name of Source and Amount, include AEF requested amount)*:

Total Project Funding/Income: \_\_\_\_\_  
\*Total Project Funding/Income  
should equal the Total Cost of Project.

## Project Evaluation

A. How will you evaluate the effectiveness of the project?

B. How will you share the information/knowledge gained from this project with other students, teachers, staff, community members, etc.?

## Other

*You may attach supporting documents. Please limit supporting documents to five (5) pages.*

A. Please provide any statement, explanation or additional information you feel would support your request.