



Pleasantville Fund for Learning  
60 Romer Avenue, Pleasantville, NY 10570  
www.pffl.org

**2016-2017**

Dear Applicant(s),

Pleasantville Fund for Learning Excellence in Education Grants are awarded to promote the enrichment of the educational experience of students in all three Pleasantville public schools. Teachers and administrators in the school district and students in Pleasantville High School may apply for grants. As a general policy, the Pleasantville Fund for Learning seeks to fund new and innovative projects that enhance curricula, offer hands-on experiential learning, and are financially and programmically sustainable.

Some important things to consider when preparing your grant for application:

- A grant request for technology (i.e., laptops/carts, tablets, whiteboards/smartboards, software) must be signed off by Drew Marino in addition to your building principal.
- A grant request pertaining to the needs of special education students must be signed off by Dr. Carolyn McGuffog in addition to your building principal.
- Please work with your department chair and building principal as you develop your grant, as they may see areas of cross-department cooperation, or know of history that may affect your application.
- The Fund generally will not consider grants for after-school clubs/programs, travel/field trips, teacher stipends, and incidental supplies for general classroom use.

**Your completed application should be submitted to your building principal for his or her comments.** Applications will be reviewed by the PFFL Grants Committee, the District Superintendent, Building Principals, and the Assistant Superintendent of Educational Services. Grant Awards will be announced at the Pleasantville Board of Education meeting.

The PFFL Grants Committee encourages applicants to request help in preparing Grant Applications. We are eager to do whatever we can to clarify the application process for you, assist you with determining if your project is suitable for consideration by the Fund, or answer any questions that you might have. Please feel free to contact us.

Joan Jacobsen (914-584-4755) [joankjacobsen@gmail.com](mailto:joankjacobsen@gmail.com)  
Keri Gregersen (914-255-4840) [k17wilson@hotmail.com](mailto:k17wilson@hotmail.com)  
Co-Chairs, Pleasantville Fund for Learning Grants Committee

*\*Note: Grant approval is discretionary, and the PFFL Board reserves the right to deviate from the guidelines based on need and yearly resources.*



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## **Excellence in Education Grants Application**

*Due to Principal: Spring, 2017*

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

Name of Applicant(s): \_\_\_\_\_  
\_\_\_\_ Student      \_\_\_\_ Teacher      \_\_\_\_ Administrator

School: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
(Students only)

Name of Parent/Guardian: \_\_\_\_\_  
(Students only)

Name of Project: \_\_\_\_\_

Content Area of Project: \_\_\_\_\_

Amount Requested: \_\_\_\_\_  
(Do not include shipping and handling.)

Students Who Will Benefit:

Grade Level: \_\_\_\_\_

Number Directly Involved: \_\_\_\_\_

Brief Description of the Project:

1) **Describe your project**, including the area it will affect or change, and which other departments it might coordinate with.

2) **Project Objectives**. The Pleasantville Fund for Learning seeks to fund innovative programs that enrich the educational experience of students. Please describe how the project is innovative and would enrich curriculum, as well as how once granted it would be sustained in years to come. Please mention which and how many students will be affected.

3) **Develop Project Plan of Action**. List specific activities and timelines for completing project objectives.

4) **Explain how completion of the objectives will be measured and what criteria will be used to determine the success of the project.**

**5) Project Budget (do not include shipping and handling)**

**Purchased Services Costs**

| Name of Service/Person                | Total Hours | Cost per Hour | Total Cost |
|---------------------------------------|-------------|---------------|------------|
|                                       |             |               |            |
|                                       |             |               |            |
|                                       |             |               |            |
| <b>Total Purchased Services Costs</b> |             |               |            |

**Supplies and Miscellaneous Costs**

| Item  | Supplier | Quantity | Cost/Item | Total Cost |
|---|----------|----------|-----------|------------|
|   |          |          |           |            |
|   |          |          |           |            |
|   |          |          |           |            |
|   |          |          |           |            |
|   |          |          |           |            |
| <b>Total Supplies and Miscellaneous Costs</b> |          |          |           |            |

**Equipment**

| Item                        | Supplier | Use | Total Cost |
|-----------------------------|----------|-----|------------|
|                             |          |     |            |
|                             |          |     |            |
|                             |          |     |            |
| <b>Total Equipment Cost</b> |          |     |            |

|                                   |  |
|-----------------------------------|--|
| <i>Total Grant Request Budget</i> |  |
|-----------------------------------|--|

**6) PLEASE ATTACH ANY ADDITIONAL MATERIALS TO THE APPLICATION (product specifications, esp. for technology; documentation supporting project's benefits, etc.)**

**7) Faculty Advisor Commitment of Support (for Student grants only)**

**I certify that this application was substantially completed by the student(s) applicant(s) and I agree to provide support if the application is granted.**

\_\_\_\_\_  
**Faculty Advisor's Signature**

**8) A grant request for standard technology equipment such as computers, smartboards, software, etc., must be signed off by Sam Aidala or Drew Marino to ensure it is compatible with District technology.**

\_\_\_\_\_  
**Drew Marino  
Technology Specialists**

**9) A grant request involving the Special Education Department must be signed off by Dr. Carolyn McGuffog.**

\_\_\_\_\_  
**Dr. Carolyn McGuffog  
Director of Educational Services**

**10) Signature of Grant Applicant(s).**

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Principal's Comment Form

*(Building Principals: Please make 15 copies of each grant for your building. The PFFL Grants Co-Chairs will then pick up the packets of grants. Thank you.)*

Application Submitted By: \_\_\_\_\_

Name of Project: \_\_\_\_\_

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

Do you believe this project should be funded at this time?

Yes \_\_\_\_

No \_\_\_\_

Comments:

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If yes, in what specific way(s) do you believe that the project will enhance the curriculum in your school?

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One of the main goals of the Pleasantville Fund for Learning is to provide seed money for projects that will continue for many years. Do you think this project is sustainable? If this project was granted, how would it be funded in future years?

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Is there any further information you would like us to have before we decide whether to fund this grant proposal or an alternative way to accomplish this grant through inter-department cooperation (i.e. sharing resources, or adding curricula components)

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Principal's Signature: \_\_\_\_\_