



The Telluride Education Foundation’s mission is to expand and enrich experiential education opportunities for students and to motivate and recognize those who guide student learning. The Telluride Education Foundation creates partnerships with Telluride schools, local funding agencies and other community organizations established for educational purposes.

## Grant Application Form

TEF reviews all grant applications and considers each one based on the Granting Criteria outlined on the backside of the application. TEF also awards grants based on the following, balancing factors:

- \*The relationship between the percentage of funds available to be disbursed and the number of students served by the grant. Our goal is to allocate funds by year end in equivalent amounts reflective of the total student population within each class and each school.

- \*The magnitude of the need of the students (or school) addressed by the grant request.

- \*The extent to which the proceeds of the grant will provide experiential learning opportunities for students.

- \*The perceived value, based on past student experiences as reported by teachers and principals of each school.

- \*The development of additional support within the community or classroom for education-related projects that have received funding in the past and have proven to be valuable.

## Submission Deadline

TEF urges applicants to submit their requests as early as possible during the year. Grant requests will be reviewed by TEF on the first Thursday of each month during the school year. All TEF Grant Applications must be submitted to TEF at least 48 hours before the monthly meeting on the first Thursday of each month. Each applicant should receive notification within one week.

(Please attach additional sheets if needed. Please print or type this form)

## General Information

Teacher/Applicant Name(s): \_\_\_\_\_

Job Title(s): \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

## **Grant Information**

**Fill out either Part A for Experiential Grants or Part B for Teacher Conferences  
All Applicants Must Complete Parts C and D**

### **A. Experiential Grants**

#### **Grant Project Description:**

Please describe the intended project you are planning with your students, including the expected learning outcomes for the students involved in the project, in the space below.

**Please describe how this project will involve students in experiential learning?**

### **B. Teacher Conferences**

#### **Conference Description and Request**

**How Will What You Learn at This Conference Enhance Your Students' Learning Experience?**

### **C. Student Information (All Applicants to Complete)**

**Number of students directly involved:\_\_\_\_\_**

**Number of students indirectly involved:\_\_\_\_\_**

**Number of teachers:\_\_\_\_\_**

**Number of class sections:\_\_\_\_\_**

**Number of class sections:\_\_\_\_\_**

**Number of teacher aides or additional adults:\_\_\_\_\_**

**Grade Level(s):\_\_\_\_\_**

**D. Budget Information (All Applicants to Complete)**

**Budget Breakdown:**

(Please indicate below what items are involved in the project, and the amount of funding expected from school budget, TEF and other funding sources (such as Just for Kids Foundation, PTSO, and other charitable organizations).)

Budgeted Items	School Budget	TEF Funds	Other Funds	Other Funds

**Total dollar amount of project:** \_\_\_\_\_

**Amount requested from TEF:** \_\_\_\_\_

**Have you used an appropriate percentage of available school funds? Yes \_\_\_\_\_ No \_\_\_\_\_**

**If yes, how much and from what source?** \_\_\_\_\_

**If you answered no, please explain in the space below:**

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## **Grant Follow-Up Designation**

All grant recipients are responsible to do one of the following follow-up activities in order to help TEF promote its mission statement. Please select which follow-up activity you plan to complete. Completion of section IV will be considered when reviewing future TEF grants.

5-10 photos will be emailed to TEF for use on their website and/or for promotional use

A letter will be written that is addressed to the editor of the local papers by the applicant and submitted to TEF for submission by TEF, at its option, to both local papers describing the project and TEF funding.

Teacher(s) and/or student (s) will prepare a short (1-3) minute or 1 page presentation on the project at a monthly TEF meeting.

All grant follow up shall be completed within 4 weeks of project completion.

**Applicant Signature:** \_\_\_\_\_

**Date:**

**Principal Signature:** \_\_\_\_\_

**Date:**

(By signing this application, the Principal is confirming that he/she has reviewed the application and considered and/or discussed with the applicant whether alternative or additional funding sources are available to assist in meeting the needs of the project.)

**Principal: If this grant application is approved, what is the school budget code/activity account into which the monies should be deposited?**

\_\_\_\_\_

## TEF Grant Follow-up Form

The following form will be required to be submitted by all grant recipients to TEF within 4 weeks of completing the TEF-sponsored activity.



To help our supporters understand how we spend our funds, we'd like to ask that you take a few minutes to answer the following questions:

**Teacher/Applicant Name(s):**

**Email address:**

**Phone #:**

**Name of Project/Event:**

**Date of Project/Event:**

**Grant Request/Project Description:**

**Beneficiaries:**

**Number of students directly involved:\_\_\_\_\_**

**Number of students indirectly involved:\_\_\_\_\_**

**Number of teachers:\_\_\_\_\_**

**Number of class sections:\_\_\_\_\_**

**Number of class sections:\_\_\_\_\_**

**Number of teacher aides or additional adults:\_\_\_\_\_**

**Grade Level(s):\_\_\_\_\_**

**Amount Received:**

**Additional Funding Sources (if applicable):**

**What did the participants gain from the project/program?:**

**Do you expect to request this grant in the future?**

**Would you make any changes to your project/event?**

**All grant recipients are responsible to do one of the following follow-up activities in order to help TEF promote it's mission statement. Please select which follow-up activity you are providing with this Grant Follow Up Form:**

**\_\_\_ 5-10 photos for use on the TEF website and/or for promotional use.**

**\_\_\_ A letter written by the grant recipient addressed to the editor of the local papers submission by TEF, at its option, to both local papers describing the project and TEF funding.**

**\_\_\_ Confirmation of teacher(s) and/or student (s) (1-3) minute or 1 page presentation on the project at the TEF meeting scheduled for \_\_\_\_\_, 20\_\_.**

**Please return this form to  
Telluride Education Foundation  
PO Box 3548  
Telluride CO 81435  
Or hand deliver to a TEF Board Member**