



Caring for Your Classroom Grant

OVERVIEW AND PURPOSE

The Caring for Your Classroom Grant was created in 2019 as a result of the Foundation's desire to support Marysville educators with more opportunities to expand their impact in the lives of students.

Research shows that nearly all teachers spend their own money on school supplies and other resources to provide an enriching experience for their students and to create an equitable and inclusive classroom.

With this grant, the Foundation seeks to support innovative and creative educators as they work to fill the gaps in resources, by providing engaging lessons and memorable experiences in the classroom.

ELIGIBILITY

To be eligible for the grant, the applicant must:

1. Be a certified or classified employee in the Marysville School District;
2. Use application answers to:
 - a. Explain how the funds will specifically be used;
 - b. Demonstrate financial need for their classroom; and
 - c. Explain how they will promote the grant and elevate public awareness around the needs of Marysville students and the greater Marysville-Tulalip community.

CRITERIA

Only fully completed applications will be considered.

REQUIREMENTS

Complete and submit the relevant application. Applications must be received by **February 14, 2020.**

1. Self-Nomination; or
2. Peer-Nomination.

Email Completed Applications to msd25foundation@gmail.com

Subject Line: Caring for Your Classroom

Physical Applications Accepted to Marysville School District Office

4220 80th St NE, Marysville, WA 98270

Confirmation via email of receipt within 24 hours. Please follow up if you do not receive.

SELECTION TIMELINE:

Application Deadline February 14, 2020
Selection Announcements March 6, 2020

AWARD AMOUNT:

\$100-\$500 based on application need and availability of funds

DISTRIBUTION OF FUNDS:

The foundation will communicate award amount to the Marysville School District Finance Department, and recipient at coordinated time. Funds will be paid for or reimbursed through normal district expense procedures.

If you have questions, please email msd25foundation@gmail.com.

**Above stated eligibility and requirements are subject to change. Any information provided in your application may be used by the Marysville School District Foundation.*

OUR BOARD MEMBERS

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Vice President: Danna Watson-Gibson
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GRANT APPLICATION – CARING FOR YOUR CLASSROOM
SELF NOMINATION FORM

Personal Information

Last Name: _____ First Name: _____

Telephone Number: (____) _____

Email Address: _____

Classroom Information

School Name: _____

Grade/Class: _____

Your Role (Teacher, Para Educator, etc.): _____

Number of Students in Class: _____

Other Sources of Funding for Your Classroom: _____

SELF NOMINATION GRANT QUESTIONS:

Please answer all the following questions. Each answer should be no longer than 250 words. Please also indicate which question(s) you are answering.

The Foundation looks for positive, detailed, and heart felt responses of how funds would empower and improve your personal experience, classroom environment, and give students a memorable impact from the proceeds.

BRIEFLY ANSWER EACH OF THE FOLLOWING QUESTIONS:

1. How will you use the resources for your classroom?
2. Why are you and your classroom the best fit for these funds?
3. If you receive the award, how do you plan to promote the grant and elevate the community's awareness of the needs of Marysville students and the Marysville-Tulalip community?

CHECKLIST:

_____ 1) This Completed Application Form; and

_____ 2) Question Responses (3 Total)

GRANT APPLICATION – CARING FOR YOUR CLASSROOM
PEER NOMINATION FORM

Teacher Nominee (recipient) Information

Last Name: _____ First Name: _____

Telephone Number: (____) _____

Email Address: _____

Classroom Information

School: _____ Grade/Class: _____

Role (Teacher, Para Educator, etc.): _____ Number of Students in Class: _____

Other Known Sources of Funding for Classroom: _____

Nominator Information

Last Name: _____ First Name: _____

Telephone Number: (____) _____ Email Address: _____

School: _____ Role: _____

PEER NOMINATION GRANT QUESTIONS:

Please answer all the following questions. Each answer should be no longer than 250 words. Please also indicate which question(s) you are answering.

The Foundation looks for positive, detailed, and heart felt responses of how funds would empower and improve your personal experience, classroom environment, and give students a memorable impact from the proceeds.

BRIEFLY ANSWER EACH OF THE FOLLOWING QUESTIONS:

1. How do you think this recipient would use the funds for this grant, and why you believe that would be the intention?
2. What are some stand-out examples that make this recipient worthy of this award for their classroom?
3. How does this nominee inspire you or other peers to build a positive working and learning environment?

CHECKLIST:

_____ 1) This Completed Application Form; and

_____ 2) Question Responses (3 Total)