



Educators for Equity Grant Application Template

Applicant Information

Please provide information about the main contact and applying organization.

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address

City State ZIP Code

Phone: _____ Email _____

School or Organization: _____

Are you a public U.S. school serving students aged preschool to 12th grade? YES NO If no, are you a non-profit? YES NO

If you are a non-profit, you must attach an IRS determination letter of your 501(c)(3) status. YES NO
Have you attached an IRS determination letter of your 501(c)(3) status? Please note this is required.

Are you a teacher, administrator, or education specialist? YES NO

I certify that I *do not* have a role in deciding whether my district or school uses NWEA products or services. YES NO

School Demographic Information

Please list the percentage of students in each subgroup served by your school or organization.

American Indian/ Alaskan Native: _____ Black/ African American: _____
Native Hawaiian/ Pacific Islander: _____ Multi-Racial: _____
Hispanic/ Latino: _____ English Language Learner: _____
FRL*: _____ Mobile and homeless: _____

* For schools, districts, or organizations participating in the *Community Eligibility Program*, please provide documentation.

Program Overview

Number of students served <i>List the number of students served overall and in each subgroup through this program.</i>	Total number of students: _____	Multi-Racial: _____
	American Indian/ Alaskan Native: _____	English Language Learner: _____
	Native Hawaiian/ Pacific Islander: _____	Mobile and homeless: _____
	Hispanic/ Latino: _____	FRL _____
	Black/ African American: _____	

Program description <i>Provide a summary of the program, including program goals, context on the students served, and details addressing how it meets the required selection criteria.</i>	
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Program timeline <i>Describe the proposed timeline for preparation, implementation, and evaluation of the program.</i>	
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Measurable Outcomes

<i>What are the academic outcomes your program aims to produce for student participants, and how will you measure those outcomes?</i>	
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Program Budget

Please complete the itemized budget template below by providing a description and cost for each expense associated with your program. Remember that while a portion of the grant can be used for supplies and materials, it is not intended to be used primarily for supplies and materials.

Expense	Description	Total

Total Budget _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____