

ACHIEVE
(Action Communities in Health, Innovation, and
Environmental Change)

GRANT APPLICATION
PACKET

Grant Applications Due:

October 1, 2011

Please return completed application to Donnamarie Cook, School Sub Team
Chair, at COOKD1@ccf.org.

ACHIEVE GRANT PROGRAM

The ACHIEVE (Action Communities in Health, Innovation, and Environmental Change) Committee, better known as CHART (Community Health Action Response Team) exists to provide encouragement and monetary support to build a healthy community by developing and implementing policy and environmental change strategies that focus on physical activity and nutrition. The sub-team that oversees the school districts in our county has ten (10) \$1000.00 grants to be awarded to any K-12 public or private school in the county. A school district can apply for more than one grant. The criteria for the selection of proposals for funding and the process for submitting proposals are:

Criteria for Funding *(Please read carefully)*

1. Applications for funding must be received by October 1, 2011. Successful October 1st applicants will receive grant money by December 1, 2011 to begin their work.
2. All Lake County K-12 public and private schools are eligible to apply.
3. Proposals should be those that have not been previously funded by the Board of Education. This is because public funds are not available due to budgetary issues.
4. Applicants which were previously funded through the ACHIEVE grant program are eligible to apply.
5. ACHIEVE is interested in supporting policy and environmental changes that add excitement and imagination to the educational process as well as promote wellness among the K-12 students.
6. Proposals should address creating healthier lifestyles for children through policy and environmental change strategy implementation with a focus on improving nutrition and physical activity.
 - A **policy change** is a rule or regulation put in place to influence behavior. An example of a nutrition policy change is to implement a rule that no candy or junk food is allowed in the classroom. An example of a physical activity policy change is to establish a policy to ensure a program will be implemented for structured periodic student fitness assessments.
 - An **environmental change** alters the physical, social or economic environment of a child to influence behavior. An example of a nutrition environmental change is to create an indoor vegetable garden for classroom use. An example of a physical activity environmental change would be to develop and initiate a Safe Routes to School plan.
7. All proposals must identify two policy and/or environmental changes to address the behavior of a classroom and/or the entire school. *This means that a school can choose to do two policy changes, two environmental changes or one of each.* However, the ACHIEVE Committee strongly recommends the adoption of one policy addressing nutrition and/or physical activity.
8. Proposals that are funded must be completed within the 2011-2012 school year. **All schools that receive funding will be required to complete assessments of their progress before and after completion. Checks will be written to the school district and mailed in the recipient's name.**
9. By submitting this application, successful applicants grant permission for the Lake County General Health District to promote the grant through press releases and other media outlets. The successful applicant will also be required to promote and publicize the grant to parents through school resources such as school newsletters, websites, and PTA/PTO meetings.

Selection Process

1. The ACHIEVE School Sub-Team will consider all funding requests in accordance with ACHIEVE guidelines. School Sub-Team members may require additional information, may request that the proposal be resubmitted in a subsequent funding period, or may approve or disapprove the request as originally submitted. If a relationship between a grant applicant exists with a member of the School Sub-Team, the team member to whom this condition applies will NOT be permitted to vote on said grant application.
2. Proposals selected for funding will be reviewed with school administrators to assure there are no conflicts that could arise because of implementation of the work proposed.
3. The School Sub-Team chairperson will notify all applicants of approved proposals. Applicants not selected for funding will be notified as to why their proposal was not approved.
4. The School Sub-Team will make all decisions and their decision will be final and not subject to review by any other body.

Process for Submitting Proposals

1. All proposals must be submitted on the attached “**Grant Application Form**”.
2. Signed applications should be submitted prior to **October 1, 2011** via email to COOKD1@ccf.org. Any applications without signatures will be returned to the applicant. If an applicant is unable to scan and email documents, the application may be faxed to Donnamarie Cook at (216) 839-3702.
3. Share your proposal request with your building administrator and secure his/her approval signature prior to submitting the grant application.

Completion of Policy and/or Environmental Change

1. Upon completion of each Policy and/or Environmental Change the following reports must be submitted:
 - a) “Grant Evaluation Report”
 - b) “Itemized Financial Report” -- attach receipts for Policy and/or Environmental Change expenditures.

All the forms listed above are included in your grant packet. Additional forms can be secured from the School Sub-Team.

2. Successful grant applicants are expected to schedule a site visit with the School Sub-Team during the project time frame (2011-2012 school year).

ACHIEVE

Grant Application

Name of Grant Applicant

Date submitted

Contact Information: address, telephone, e-mail

School District

Building Name

Number of Students Participating

Age Group/Grade Level of Students

DESCRIPTION OF POLICY AND/OR ENVIRONMENTAL CHANGES:

Refer to 'Criteria for Funding' on Page 1 of grant program for more information.

Describe two policy changes, two environmental changes or one policy and one environmental change that will be implemented:

Identify the strategies or action steps that will be used to achieve the policies or environmental changes in the proposal.

How will these changes influence children's behavior?

How will these changes promote a healthier lifestyle for children?

Has this work been funded before by another organization?

YES / NO

Circle one

If yes, name the organization: _____

Amount received: _____

(Please attach any additional information or comments necessary in reviewing this application.)

BUDGET: (Please note that ACHIEVE **will not** fund expenses for travel or stipends.)

<u>Category</u>	<u>Estimated Amount</u>
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Estimated Amount

Purchased Services (i.e. presenter/facilitator – non-school employee only) _____

Materials/Supplies (please itemize in the space provided below)

Include shipping charges on mail order items:

Total Materials/Supplies _____

Admission/Registration Fees

Total Admission/Registration Fees _____

Other Expenses (please be very specific)

Total Other Expenses _____

TOTAL COST

Have you secured or applied for other sources of revenue for this work? YES / NO

Circle one

If YES, please list the sources and specific amounts that you have been granted.

Grant Implementation Date (If grant is approved) _____/_____/_____

Month

Year

SIGNATURE PAGE

NOTE: Successful grant applicants are expected to present a brief summary of their work at a

Signature of Applicant

Date

Signature of Building Administrator

Date

Your signatures above indicate that all the criteria stated in the application process have been met, and believe the content is educationally appropriate for the students that will participate.

**PLEASE RETURN COMPLETED APPLICATION TO Donnamarie Cook at
COOKD1@ccf.org.**

DO NOT WRITE BELOW THIS LINE (*For Official Use Only*)

GRANT APPROVED _____
COMMENTS:

GRANT NOT APPROVED _____
COMMENTS:

ACHIEVE
ITEMIZED FINANCIAL REPORT

Date: _____

Grant Recipient: _____ Grant Amount: _____

Description: _____

School: _____ District: _____

Period of this report: _____ to _____
Date Date

Amount received: \$ _____ Date

\$ _____ Date

\$ _____ Date

\$ _____
Total Received

PAID OUT TO: *(Please attach receipts.)*

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
Total Paid Out

REMARKS: _____

\$ _____
Funds Remaining

Recipient's Signature

PLEASE RETURN FORM TO Donnamarie Cook at COOKD1@ccf.org.

ACHIEVE
GRANT EVALUATION REPORT

Grant Recipient(s) _____

School: _____

Work Title: _____ School Year _____

Grant Award Amount: _____

DESCRIBE THE OUTCOMES: _____

WERE THE OUTCOMES ACHIEVED? What worked and what didn't work?

PROVIDE INFORMATION ON HOW THE SUCCESS WAS DETERMINED:

WHO PARTICIPATED WITH IMPLEMENTATION? _____

Number of Students: _____ Number of Teachers: _____

Others Involved : _____

DO YOU BELIEVE ACHIEVE WORK SHOULD BE CONTINUED NEXT SCHOOL YEAR?

5	4	3	2	1
<i>Rating of results: (circle one) SUPERIOR</i>	<i>Good</i>	<i>Average</i>	<i>Minimal</i>	<i>Poor</i>

Please attach any relevant material (i.e. photographs, newspaper articles, videos, etc.).

Signature / Date

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