# Whisper Grant for Students in Need

## **Ohio Education Association Foundation**

Mission: To design, develop, promote, and implement public education programs and materials intended to educate and improve the efficiency and effectiveness of education professionals in the State of Ohio.

#### Foundation's goal

The Ohio Education Association seeks to encourage and support programs that focus on creativity and innovation, community outreach, student and education professionals' well-being, and diversity in Ohio's public education.

Deadline: ..... February 1, 2020

Funds to be spent by: ..... May 2021

#### **Application process**

The Whisper Grant for Students in Need offers direct assistance to an individual student with educational or personal needs when a hardship is identified. Grants are issued to a requesting educational staff member to purchase items that improve an individual's school learning or academic performance or to assist with basic needs such as eyeglasses, personal hygiene items, repairs to broken wheelchair, etc.

Any active and dues paying member of the Ohio Education Association may apply for the grant. An individual student may only receive one grant in a school year. Funds must be used for the student identified on the grant application and enrolled in an Ohio public school. A maximum of \$2,000 will be awarded to a school per school year ( September 1-June 15) unless there are extenuating circumstances. Grants may be awarded for amounts up to \$500 based on determined needs and calculated costs.

The OEA member must have spending pre-approved through the grant process and be the person to make all purchases. Gift cards may not be purchased, and money is not be given to the parents or students. The OEA member must shop wisely to ensure that funds go as far as possible to meet the students needs. The Foundation Strongly encourages grantees to help increase Foundation donation and participation within the community.

All proposals will be reviews and rated by the OEA Foundation. Final decisions will be made by the OEA Foundation Board of Directors.

# Whisper Grant for Students in Need Application: Data

DATA IS TO BE COMPLETED BY THE OHIO EDUCATION ASSOCIATION MEMBER ACTING AS "MEMBER PROJECT COORDINATOR" FOR THE PROJECT.

Applicant's Name:
Address, City, State, Zip:
Applicant's County:
Home Phone:
School Phone:
Work Email:
Local Association:
Applicant's School
# of Association Members Participating in Project:
(attach names, position titles, and addresses on a separate sheet)
Projected Ending Date of Project:
ALL APPLICATIONS MUST BE RECEIVED BY THIS OFFICE NO LATER THAN FEB. 1, 2020  Grant applications may be submitted using the new OEA online form tool or printed, and then mailed/emailed, to:
Ohio Educational Foundation OEA Awards Committee 225 E. Broad St., Columbus, OH 43216 Foundation@ohea.org
YOUR LOCAL PRESIDENT SHOULD COMPLETE THIS SECTION  Local Organization:
Local President Name

My signature below indicates that I have reviewed this application. Should this project be awarded grant funds, the local agrees to support the project and help prepare Final reports summarizing the project outcomes and related financial expenditure. My signature also certifies that the member project coordinator is an active member of the Ohio Education Association.

Signature of I	Local President :		
Date:			
<u> </u>			
Whispe	er Grant for Students in Ne	eed Application:	Budget
-	PPLICATIONS MUST INCLUDE DETAILED SOURCE(S), INCLUDING	QUOTES FROM THE VEND	
Description (materials, ed	quipment, supplies, speakers, consultants, etc.)	Vendor / Source	Cost
		Sub Total	
		Shipping	
		Total	
\$	Total grant funds requested.		
\$	Additional funding secured or to be secur granted.	ed from other sources if OEA g	rant funds are
\$	Total project cost.		
\$	If full funding is not available, what is the	minimum required to begin the	project?

# Whisper Grant for Students in Need Application: Narrative

### ALL APPLICANTS MUST ADDRESS ALL NARRATIVE TOPICS.

Please answer the following questions on a separate sheet of paper. (maximum three sheets)

Title of Project			
Points	Describe what grade(s) or academic level(s) and subject area(s) discipline(s) the project is designed for.	or	
Points	2. Who will be collaborating on this project? (i.e. schools, grades, a community partners)	nd/or	
Points	3. What is the date and amount of the request?		
Points	4. What is the student's name and their grade level?		
Points	5. Describe the item(s) to be purchased.		
Points	6. Describe the reason for the request.		
Submitted t	by:Date:		
Parent/Gua	ardian Acknowledges Request an Agrees to Accept Purchase(s):		
Signature	Date		