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

Funds to be spent by: May 31

Application process

The Whisper Grant 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 \$10,000 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 FEBRUARY 1

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 Local President :					
Date:					
Whisper Grant for Students in N	eed Application: E	Budget			
ALL APPLICATIONS MUST INCLUDE DETAILED QUOTES FROM THE VENDOR(S) / SOURCE(S), INCLUDING SHIPPING.					
Description (materials, equipment, supplies, speakers, consultants, etc.)	Vendor / Source	Cost			
	Sub Total				
	Shipping				
	Total				
\$ Total grant funds requested.					
Additional funding secured or to be secu granted.	Additional funding secured or to be secured from other sources if OEA grant funds are granted.				
\$ 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 discipline(s) the project is designed for. 	t area(s) or	
Points	2. Who will be collaborating on this project? (i.e. schools, community partners)	grades, and/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.		
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Submitted b	oy:Date:		
Parent/Gua	rdian Acknowledges Request an Agrees to Accept Purchase	e(s):	
Signature		Date	