

VICTORIA ISD EDUCATION FOUNDATION

2020-2021 Grants for Great Ideas

Signature Page

INTERNAL USE
ONLY
Grant Application
No.

Project title: _____

Application type: *(check only one)*

Individual teacher (up to \$1,000)

Campus team, department or district initiated project (up to \$2,500)

Significant project (up to \$5,000)

Amount requested: \$ _____

Applicant information:

(Primary Applicant Name)

(Signature)

(VISD Email Address)

(Phone Number)

Name, signature and email address of other applicant(s) associated with this application:

(Printed Name)

(Signature)

(VISD Email Address)

Application approved by:

Signature of Principal*

Date

Signature of Director of Technology**

Date

Signature of Director of Maintenance***

Date

**Approves submittal of application and is committed to the project's sustainability.*

***Required when funds will be used to purchase technology and/or media equipment.*

****Required when funds will be used for construction or maintenance.*