Turner USD Grant Approval Form

To be submitted with Grant Application

1. Person(s) Filing for Grant: Emerald Given

2. Building/Department: Oak Grove Pre-K

3. Phone Number: (913) 288-3948

4. Email: givene@turnerusd202.org

5. Grant Title: Creating Tomorrow's Leaders by inspiring a love for learning

6. Granting Agency: Donors Choose

7. Grant Website: Donors Choose

8. Grant Period: 8 / ___ / 22 (start date)
10 / ___ / 22 (end date)

9. Grant Summary: materials for dramatic play in my Pre-K classroom.

10. Required Matching Fund: ☐ Yes ☒ No

If yes, list name of party agreeing to match funds and the amount required.

Name: _____

Amount: _____

Additional Notes:

Application:

☒ New

☐ Renewal

☐ Continuation

Required Signatures

Building Principal Signature: _____ Date: 11/4/22

Applicant Signature: Emerald Given Date: 11/3/22

Supervisor of Business Services: Kristen Woodbury Date: 11/7/22

Asst. Superintendent of Student Services: _____ Date: ___/___/___

Board of Education President: _____ Date ___/___/___