



**Turner USD Grant Approval Form**  
*To be submitted with Grant Application*

- 1. Person(s) Filing for Grant: Erin-Louise Chapman
- 2. Building/Department: Midland Trail Elementary/Librarian
- 3. Phone Number: 913-288-3530
- 4. Email: chapmane@turnerusd202.org
- 5. Grant Title: Fall 2024 Collection Development Grant
- 6. Granting Agency: North East Kansas Library System
- 7. Grant Website: https://www.nekls.org/
- 8. Grant Period: 09 / 23 / 24 (start date)  
06 / 09 / 25 (end date)

Application:

- New
- Renewal
- Continuation

9. Grant Summary:

I will be writing this grant to replace our current biography section with picture book biographies that will peak the interest of our st  
students and also support the curriculum of classrooms as they do research.

10. Required Matching Fund:  Yes  No

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

Name: \_\_\_\_\_

Amount: \_\_\_\_\_

Additional Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Required Signatures**

Building Principal Signature: [Signature] Date: 4 / 10 / 24

Applicant Signature: [Signature] Date: 4 / 10 / 24

Asst. Superintendent of Business Services: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Asst. Superintendent of Student Services: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Board of Education President: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_