

**WOODFORD COUNTY BOARD OF EDUCATION
AGENDA ITEM**

ITEM #: 141 **DATE:** May 6, 2019

TOPIC/TITLE: Grant Application/Simmons Robotics Club/Junior League of Lexington

PRESENTER: Jimmy Brehm

ORIGIN:

- ☐ TOPIC PRESENTED FOR INFORMATION ONLY (No board action required.)
- ☒ ACTION REQUESTED AT THIS MEETING
- ☒ ITEM IS ON THE CONSENT AGENDA FOR APPROVAL
- ☐ ACTION REQUESTED AT FUTURE MEETING: (DATE)
- ☒ BOARD REVIEW REQUIRED BY

- ☒ STATE OR FEDERAL LAW OR REGULATION
- ☐ BOARD OF EDUCATION POLICY
- ☐ OTHER:

PREVIOUS REVIEW, DISCUSSION OR ACTION:

- ☒ NO PREVIOUS BOARD REVIEW, DISCUSSION OR ACTION
- ☐ PREVIOUS REVIEW OR ACTION

- ☐ DATE:
- ☐ ACTION:

BACKGROUND INFORMATION:

Per Board policy - grant applications must be pre-approved.

SUMMARY OF MAJOR ELEMENTS:

We are requesting Board approval for Simmons to apply for, and accept if awarded, a \$1,900 grant from the Junior League of Lexington in order for them to expand their Robotics Club per the attached request.

IMPACT ON RESOURCES: N/A

TIMETABLE FOR FURTHER REVIEW OR ACTION:

SUPERINTENDENT'S RECOMMENDATION: ☒ Recommended ☐ Not Recommended



Woodford County Schools

Preliminary Grant Proposal Form

After completing and printing this form as a Word document, please send it—along with grant application details or instructions—to the Superintendent's Office.

1. Project title: Robotics Club
2. School(s): Simmons Elementary
3. Your name: Mindy Logan
4. Your e-mail address: mindy.logan@woodford.kyschools.us
5. Phone number: 859-879-4670
6. Source of grant: Junior League of Lexington
7. Amount of request: \$1,900
8. Proposal deadline: 6/1/19
9. Today's date: 4/22/19
10. Briefly describe the project: Simmons Elementary would like to expand their current robotics club. We would add a "Girls Who Code" group and invite girls who really show an interest in STEM to join. With the grant money we would purchase the needs to have four competition ready VEX robot kits.
11. What items do you plan to purchase? 4 VEX robot super kits, 4 VEX competition add on kits, 8 omni wheel kits, 4 gear add on kits, and 4 gear differential packs.
12. What will you ask Woodford County Schools to contribute? 0
13. What is the duration of this grant? This is a one time grant.
14. Who will write the grant proposal? Chris Richards, parent volunteer for Simmons Robotics.

☒ Approved to complete grant application

☐ Not approved. Reason:

Jeffery Cox

RECEIVED

APR 26 2019

WOODFORD COUNTY
BOARD OF EDUCATION

2020 Project Proposal Grant Application

Please return the completed form by **June 1, 2019** to:

grants@lexjrleague.com or

The Junior League of Lexington, Inc.
Attn: CE&R Chair
P.O. Box 687
Lexington, KY 40588



JUNIOR LEAGUE
of **LEXINGTON**

Empowering Women of the Bluegrass
Volunteerism | Philanthropy | Historic Preservation

- **No attachments will be accepted with this application**
- **Limit your response to two pages.**

Agency Information:

Agency _____

Agency's Mission _____

Total Operating Budget _____ Year Founded _____

Tax I.D. # _____

Address _____ Zip Code _____

Website _____ 501(C)(3) Yes _____ No _____

Contact Person _____ Phone _____

Contact E-mail _____

Previously Funded by Junior League? Yes _____ No _____ When? _____

Does a member of the Junior League of Lexington sit on your Board or work for your agency? Yes _____ No _____

Project Information:

Project Title _____

Project Supervisor _____ Phone _____

Project Supervisor's E-mail _____

Dollar Amount Requested from the Junior League _____

Is Partial Funding Acceptable? Yes _____ No _____ Total Project Cost _____

Other Current or Possible Sources of Funding for this Project or Partnering Agencies _____

Project Start Date (MM/YYYY) _____ Project End Date (MM/YYYY) _____

Number of People Served/Target Population _____

Project Description:

Specific Number of Junior League Volunteers Requested for this Project (not a range): _____

List Specific Volunteer Opportunities Associated with the Proposed Project: (indicate day or nighttime, hours involved, any special training, tests or screening necessary, and any additional costs incurred along with party responsible for payment of those costs):

List other volunteer opportunities (not associated with the project) within the agency (indicate day or nighttime, any special training, tests or screening necessary and additional costs):

Signatures: Agency Director _____ Date _____

Board Chairman _____ Date _____