KCSD

Kenton County School District | *It's about ALL kids.*

THE KENTON COUNTY BOARD OF EDUCATION
1055 EATON DRIVE, FORT WRIGHT, KENTUCKY 41017
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WEBSITE: www.kenton.kyschools.us
Dr. Henry Webb, Superintendent of Schools

KCSD ISSUE PAPER

DATE:
January 12, 2018

AGENDA ITEM (ACTION ITEM):
Consider/Approve Approve Piner's application for the Greater Cincinnati Foundation's Summertime Kids grant for use during Piner Elementary's Summer of STEAM Learning Program Summer 2018.

APPLICABLE BOARD POLICY:
General Powers and Duties of the Board 01.11

HISTORY/BACKGROUND:
Piner Elementary has long held a free summer learning program for all students in grades K-5 to combat the "summer slide." It has been an effective strategy to maintain or even increase students' reading and math skills, as measured by comparing Spring and Fall MAP tests data. This year, we would like to continue with the reading aspect of our summer program, but expand it to include STEAM (Science, Technology, Engineering, Arts, and Math) learning opportunities. This grant will provide us with the additional funding needed to provide materials and staffing.

FISCAL/BUDGETARY IMPACT:
It is anticipated that the grant amount would be $1,000.00

RECOMMENDATION:
Approval for Piner Elementary to apply for the GCF Summertime Kids grant is recommended

CONTACT PERSON:
Christi A. Jefferds

Principal	*District Administrator*	*Superintendent*

Use this form to submit your request to the Superintendent for items to be added to the Board Meeting Agenda.
Principal –complete, print, sign and send to your Director. Director –if approved, sign and put in the Superintendent's mailbox.

GCF Summertime Kids Application

The Greater Cincinnati Foundation

Instructions

Complete all required fields. <u>Please make sure to review the Summertime Kids Criteria and Guidelines available on the website.</u> Contact the GCF Program Manager with technical or timing issues. Thank you for considering partnering with GCF to accomplish your important work.

Request & Organization Basics

Project Name*

Name of Project.

Character Limit: 100

Total Amount Requested*

Maximum request is $1,000.00 and awards will be made in whole dollar amounts only.

Character Limit: 20

Total Project Budget*

Character Limit: 20

Organization Overview*

Include brief history, mission, programs, numbers served, staff size.

Character Limit: 750

President/CEO/Director*

Name, qualifications, longevity in role

Character Limit: 250

Program/Project Basics

Program/Project Overview*

Describe the project, its history, its purpose, and details about how/where it will be carried out. Links to the community need or opportunity described below are helpful.

Character Limit: 750

Community Need or Opportunity*

Make the case for the need for this program, including the selection process of the youth involved (how, by whom, and from what area). What percentage of youth served are from low-income households?

Character Limit: 750

Timeframe of Engagement*

How many weeks of the summer? How many days per week? How many hours per day? Project must take place between June 1st and August 31st of the current year.

Character Limit: 250

PEOPLE INVOLVED:

of kids*

Character Limit: 10

Age range of participants*

Character Limit: 100

of Parents/Caregivers*

Character Limit: 10

of staff*

Character Limit: 10

of volunteers*

Character Limit: 10

of others involved*

Character Limit: 10

% of participants at or below Federal Poverty Level*

Character Limit: 20

Additional comments regarding these numbers

(e.g. approximation based on actuals from last year, approximation based on anticipated numbers, etc.)

Character Limit: 500

Who will lead this project?*

Name, qualifications, longevity in role.

Character Limit: 250

Counties Served by Program*

Please note the counties from which your participants reside. Not necessarily where the program is located.

Choices
Boone
Butler
Campbell
Clermont
Dearborn
Hamilton
Kent
Warren

Neighborhood/Township

Please note the neighborhoods/township from which your participants reside. Not necessarily where the program is located.

Character Limit: 250

Partnerships*

List primary, confirmed partners to accomplish the project in this proposal.

Character Limit: 250

Other Funders*

List other funders for this project for this grant period including amounts and status (ie: prospect, pending, received).

Character Limit: 1000

Attachments and Authorization

Project Budget*

What are the financial needs of this project? Summarize materials needed and other expenses along with their dollar amount. Be sure to note any donated items or services. Be sure to indicate which expenses the grant would cover.

Please use our budget template which can be downloaded by clicking here. Save this document to your computer and enter your project expenses. Totals will auto-calculate. When complete, upload your saved version below.

File Size Limit: 15 MB

We have carefully read the criteria and guidelines.*

If we receive a grant, we agree to use the funds as granted and will complete a short evaluation report on or before October 5, 2018. We will allow The Greater Cincinnati Foundation to use information provided in this request for news releases, reports and other public information.

Choices

I agree

I disagree

The follow up report will ask you to provide actual numbers served, economic need of those served (if available), a good story about your program, and a photo that is suitable for the Foundation's website or Annual Report.