

Franklin-Simpson Educational Excellence Foundation, Inc.

GRANT APPLICATION COVER PAGE

Application must be typed. If you experience difficulty completing, please contact our office at email

Applicant Name & Position: Katelynn Sexton 5th Grade Teacher

School/Organization Involved: Lincoln Elementary

Amount Requested: \$700 - estimate from bus garage was \$680

Purpose of Funding: Transportation to Adventure Science Center for our 4th/5th Grade team

Targeted Grade Levels: PreK-K 1-3 4-5 6-8 9-12 Other: _____

Number of Students/Persons Affected by Grant: approx: 100

Academic Area: Reading Language Arts Social Studies Math
Science Fine arts Community Other: _____

Brief Summary of Project (2 - 3 Sentences):

Our 4th and 5th grade students would greatly benefit from the opportunity to visit the Adventure Science Center. This hands-on field trip allows students to experience science concepts in an interactive environment that extends learning far beyond the classroom. Through exhibits focused on physics, engineering, space, and the scientific process, students are able to explore, question, and apply the STEM concepts they are studying in school. Funding for transportation would ensure that all students—regardless of financial circumstance—have access to this enriching educational experience. For many of our students, this trip would be their first visit to a science museum and an opportunity to see real-world connections to their learning. By removing the barrier of transportation costs, this grant would allow our entire team to engage in meaningful, curiosity-driven learning that inspires future interest in science and exploration.

Address of School/Organization: 601 John J Johnson Ave. Franklin, KY 42134

Contact Person: Katelynn Sexton

Phone: (Day & Evening) 270-586-7133 (LES) **Fax:** _____

E-Mail: katelynn.sexton@simpson.kyschool.us

Grant Cycle Submitted: September November February April

Required Signatures

Simpson County Schools:

Principal/Supervisor Natahe McAuliffe **Date** 3/9/26

Superintendent _____ **Date** _____

Community Organizations:

Grant Preparer [Signature] **Title** Teacher **Date** 3/9/26

Board Representative _____ **Title** _____ **Date** _____

PLEASE USE THE FOLLOWING INFORMATION TO CREATE YOUR GRANT APPLICATION.

Writing Guidelines

1) Application is complete and follows format outlined below, two to four pages in length, postmarked by deadline, includes **12** copies (one for each director & staff) or digital media and one hard copy including signed cover sheet.

2) Demonstrates innovative and/or program/curriculum or identifiable need.

3) Clearly defines learning goals and offers a meaningful way to measure success.

4) Clearly defines an area of need for students, school, or community.

5) Simpson County Schools applicants **MUST** include signatures of principal & board approval **before submitting to FSEEF.** (See Important Considerations below.)

A. NARRATIVE: Choose Option I or II depending on organization's status:

I. SIMPSON COUNTY SCHOOLS AND PERSONNEL

Describe Your Request

1) Describe the problem(s) or need(s) addressed by this request. Be sure to:

a. State your school's mission.

b. Clearly describe how this program/project will help your school to carry out its mission

2) Describe in detail the specific activities and strategies of this project,

3) Incorporate a **timeline** for implementation.

4) Describe in detail the expected outcome/goals of your project and how these outcomes will be measured.

OR

II. COMMUNITY ORGANIZATIONS

Organizational History and Structure

1) Briefly describe your organization's purpose, mission, and goals.

2) Is your organization tax-exempt?

3) Detail your sources of total program funding/ financial support.

4) Provide a list of board members and staff as an attachment.

Describe Your Request

1) Describe the problem(s) or need(s) addressed by this request.

2) Describe the specific activities and strategies of this project.

3) Incorporate a **timeline** for implementation.

4) Describe the expected outcome/goals of your project. Explain how the outcomes will help meet your organization's mission.

B. EVALUATION

1) Please describe the evaluation method you will use to measure the success of your project. What questions will be answered?

C. BUDGET—Must be reasonable for scope of project and number of learners affected.

1) Provide a **detailed** budget of how you plan to use the requested funding to ensure the success of your proposed project. Applicants may attach estimates, quotes or data collected online to support budget projections. Attachments DO NOT replace a constructed project budget.

2) Please indicate any other sources of funding you are seeking for this project and the amounts anticipated from those sources.

D. APPLICATION SUMMARY—

Applicants should clearly discuss how the proposed project meets not only their school/organization’s mission statement, but also how it meets FSEEF’s mission.

IMPORTANT CONSIDERATIONS for completing your proposal:

- FSEEF funds learner-directed projects. Applicants should not submit for travel, training, “bricks and mortar,” or salaries UNLESS it can be ***justified clearly and completely*** as an integral part of the project.
- Applicants must follow the format outlined in this application packet. A completed cover sheet must be included in addition to the narrative portion which addresses A-D in outline above. Failure to submit a complete application will result in application being returned for revision to meet the established guidelines and will delay consideration until the next cycle.
- Out of fairness to all applicants, FSEEF board members should not be asked to review applications prior to submission.
- Applications will be reviewed in order received. Early submission is encouraged.

Grant applications will be compiled and reviewed on a quarterly basis as indicated below.

<i>2025-2026 FSEEF Meeting Dates for Grant Review</i>	<i>Grant Must Be Submitted by 2:00 p.m on this date</i>
<i>8/25/2025</i>	<i>8/15/2025</i>
<i>9/22/2025</i>	<i>9/12/2025</i>
<i>10/27/2025</i>	<i>10/17/2025</i>
<i>11/24/2025</i>	<i>11/14/2025</i>
<i>12/22/2025</i>	<i>12/12/2025</i>
<i>1/26/2026</i>	<i>1/16/2026</i>
<i>2/23/2026</i>	<i>2/13/2026</i>
<i>3/23/2026</i>	<i>3/13/2026</i>
<i>4/27/2026</i>	<i>4/17/2026</i>

*****Applications submitted by Simpson County Schools personnel MUST have board of education approval PRIOR to submission to FSEEF. Contact the Central Office to have approval of your application included on the board agenda. Central Office will need a copy of your proposal to be signed by the superintendent after board approval. Board of Education meeting dates are subject to change. Applicant is then responsible for submitting the SIGNED proposal to FSEEF.***

Allow a 1-2 week review period. All applicants will be contacted within one week of grant review meeting.

**Send completed applications to:
FSEEF Grant Applications, P.O. Box 94, Franklin, KY 42135-0094
or e-mail to**

