

Category: Professional Member Associate Member

## Type or print clearly using black ink.

Name of Applicant
Home Address
City/State/Zip
Home Phone
Home E-mail
Position/Teaching Assignment
School District
Campus/Building
Campus Address
City/State/Zip
School Phone
School E-mail
I assert that all information included on this grant application is true and accurate
Applicant Signature: Date:
All applicants will receive consideration for the Galena Park ATPE Grant without regard to sex, race, color, national origin or ancestry, religion, age, handicap, or marital status.

## **GALENA PARK ATPE**

## **2024 Grant Essay Questions**

Each applicant must answer the essay questions below and attach them to the application form when returning it to the committee chairman. Limit responses to one typed or printed double
Please type or print clearly using black ink.

Pages exceeding the one-page-per-question limit will not be considered by the judging committee.

## **Essay Questions**

- **1.** Describe the project and/or identified need. How many students will be affected by your project? (Itemized expenses should not exceed \$400.00.)
- **2.** How do you plan to put the grant to use? If the grant will not cover planned expenditures, how will you generate additional funds?
- **3.** How does the learning experience in this proposal relate to the school curriculum?
- **4.** Provide any additional comments/information you think might be helpful.

When complete, mail this form and your essay question answers to:

Lynn Nutt c/o GPISD Administration Building 14705 Woodforest Blvd. Houston, Texas 77015 Fax 832 386-1427

For questions: Contact Lynn Nutt at Inutt@galenaparkisd.com

Or call Lynn at 832-386-1006

Grant applications may be faxed or inter-office mailed by March 1, 2024 or postmarked no later than