

READ ACROSS AMERICA GRANT APPLICATION
KENTUCKY EDUCATION ASSOCIATION
2018-2019

Grant criteria: Each year, KEA budgets funds to support Read Across America events sponsored by KEA districts and KEA locals. Although March 2 of each year (Dr. Seuss' birthday) is officially designated as "Read Across America Day," events can occur on any date. The primary purpose of the Read Across America program is to promote literacy. In addition, KEA will also judge grant requests based on the following criteria: the degree to which the activity encourages participation by multiple categories (Active, Retired and Student) of KEA membership, the number of children and students that are expected to participate, the expected level of publicity and community outreach, development of strong KEA locals, and other relevant criteria that may be established and considered by the grant committee.

Application process: Applications must be submitted on this official form. Extra pages may be added if necessary. Incomplete forms may not be considered. **Complete the form and email it to Dennis Janes at djanes@kea.org or fax it to (502) 696-8945. All grant applications must be received by KEA on or before Monday, September 17, 2018.** Funding decisions will be made by KEA's Read Across America Committee on or before October 15, 2018. You will be notified of the decisions. The maximum grant amount is \$500.00. Each district or local may only receive one grant per year.

KEA local or district information: (This is the person and address to which any grant will be mailed.)

Name of local or district sponsoring the event: _____

Name of local or district president: _____

Mailing address of the president: _____

Grant writer information: (This person must answer any questions about the grant application and will be responsible to submit required documentation after the event occurs.)

Name: _____

Email address: _____

Telephone: _____

Date of planned Read Across America event: _____

Location of planned event: _____

Is the event location a school facility? YES NO

IMPORTANT: If the event will take place in a school facility, the signature of the school principal or superintendent must be included on the last page of this form.

DO NOT WRITE IN THE MARGINS OF THIS PAGE.

Describe the planned event:

Who will benefit from the event?

Who will be involved in the planning and execution of the event?

How will the event be publicized?

Proposed budget for the event

Describe the anticipated purchases for which granted funds will be expended.

Estimated cost

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
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_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Subtotal: \$ _____

Other funding sources, if any, to be subtracted from subtotal: \$ _____

Total amount requested from KEA (cannot exceed \$500) \$ _____

IMPORTANT: All grant recipients must submit proof of approved expenditures to KEA within thirty (30) days after the Read Across America event. Failure to timely submit proof of expenditures may render the district or local ineligible for future grants.

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Cat In The Hat Costume

KEA owns two (2) Cat in the Hat costumes that may be available for use at your event. Costumes are lent on a "first come, first served" basis. Requesting use of a costume does not guarantee its availability. **Anyone who requests a costume will be responsible to pick it up, handle it properly, and return it to KEA Headquarters or to the next scheduled event.**

Are you requesting a Cat in the Hat costume for your event? YES NO

If so, what date do you plan to pick up the costume? _____

On what date will you return the costume? _____

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I certify that I have reviewed the "Official Cat in the Hat Logo Guidelines" found at <http://www.nea.org/grants/13082.htm>. I understand the terms and agree to abide by them.

Grant writer's signature: _____

Date: _____

KEA district or local President's signature: _____

Date: _____

School administrator's signature (if required): _____

Date: _____

KEA OFFICE USE ONLY -----

Received by KEA (initials) _____ Date: _____

Approved? YES NO

Amount? \$ _____

Notification sent (initials): _____ Date: _____

CITH suit requested? YES NO

Date(s) suit will be needed: _____