

M.C.L.E.

Manitoba Council for Leadership in Education

Grant Application Form

Project Title: _____ **Date:** _____

Organization Information:

Organization Name: _____

Partner Organizations: _____

Contact: Name: _____ Position: _____

Address: _____

Telephone: _____ Email: _____

Banking: Who will be responsible for receiving and depositing the grant cheque, if awarded?

Name: _____ Position: _____

Address: _____

Telephone: _____ Email: _____

Which MCLE grant are you applying for?

___ Leadership Support Fund – supporting start-up educational leadership development that is innovative and potentially ongoing. Maximum year one award is \$5000, decreasing in years two and possibly three. Year-end reports are required and a final report must be disseminated publicly.

___ Leadership Project Grant – awarding up to \$1000 to support innovative educational leadership development that is usually a single event or one-year in length. A final financial report is required.

Authorization:

I/We verify that this application for funds has been approved by the organization's executive.

1) Signature _____ Date: _____

Name (print) _____ Position: _____

2) Signature _____ Date: _____

Name (print) _____ Position: _____

For MCLE office use only:

Amount requested: \$ _____ Amount approved: \$ _____

Approval Date: _____ MCLE Signature _____

Project Information:

Please refer to the flowchart of the MCLE funding process. Applications to both grants must be innovative and enhance educational leadership. Applications to the Leadership Support Fund must also demonstrate that funding will be used to start up a project that has potential to be ongoing when MCLE funding ends.

Please provide the following information as briefly as possible. Rather than completing a redundant application, feel free to submit existing project documents (e.g.; planning documents, budgets, other funding applications) that already provide this information and draw our attention to the pertinent information. The bracketed numbers indicate a weighted value for each item.

1. What is the anticipated impact on educational leadership? How does it enhance leadership capacity? Will the MECY Certification Unit grant administrator's/principal's credits? (15)
2. How is the project innovative (i.e., introducing something new)? (15)
3. How does the project fit your organizational strategic plan and goals and have the potential to be an ongoing activity when MCLE funding ends? (15)
4. Who will benefit from the project? What are the partner organizations and their relationships? Who are the target participants? (10)
5. What are the expected start and completion dates, project stages and activities? (15)
6. What changes do you anticipate as a result of the project? How will you evaluate the project and disseminate information about the results? (10)
7. What financial or other support are you requesting from MCLE? When is it required? (5)
8. Is there other information that might be helpful to MCLE when considering your request?
9. What is the proposed, balanced budget, including major expenditure categories and revenue sources? Use the following budget sheet, if you wish. (15)

Sample Budget Sheet

Project:					
Organizer:					
	Year 1	Year 2	Year 3	Year 4	Cumulative
Major Expenditure Categories					
					0
					0
					0
					0
					0
<i>Total</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>
Major Revenue Sources					
					0
					0
					0
					0
					0
<i>Total</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>



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MCLE Project Funding Cycle

