



Sample Technology Grant Application – 2018 – 2019

Introduction:

Thank you for your interest in the UCLA Health Sound Body Sound Mind (SBSM) Technology Grant. Applications are due by **10 p.m. Friday, October 5th, 2018**. In order to be considered for funding, the following criteria must be met:

- Your school **MUST** have received a SBSM Fitness Center
- Your school **MUST NOT** have received a technology grant in the past
- Your application **MUST** be completed through the online portal (handwritten or emailed applications will not be accepted)
- All sections of this application must be completed. Required answers left blank will prevent your application from being reviewed
- Your application must be submitted no later than 10 p.m. on **Friday, October 5th, 2018**
- **No late submissions will be accepted**

Please carefully review the grant information before submitting an application for a Technology Grant. There is no set funding amount for this grant, but the maximum award amount is \$5,000. Please note that it is not common to receive the maximum award amount. All grant awards are based on submitted requests. Please provide as much detail as you can when describing your vision for incorporating new technology into your P.E. program. Please note that all requests should be thought of as a wish list. We will do our best to fund as many requests as possible. Please see next page for important information regarding the grant timeline.

Please note: **your work on the online application portal will NOT be saved until you submit the completed application.** If you would like to practice with a draft before submission, please print and use this sample application.

For questions or more information, please contact:

Amanda Gittleman – Program Manager, UCLA Health Sound Body Sound Mind
Phone: (310) 500 – 4291
Email: agittleman@mednet.ucla.edu

2018 – 2019 UCLA Health SBSM Technology Grant Timeline

October 5, 2018: Deadline for all grant submissions

November 2, 2018: Final candidates will be notified

January 15, 2019: Equipment orders will be placed and implementation logs will be sent out

April 12, 2019: Deadline to submit implementation logs tracking the first year of technology use

Please note: dates may vary

Application begins on the next page

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Qualifying Question

Has your school ever received a Sound Body Sound Mind Fitness Center?

If your school *has not* received a SBSM Fitness Center, you are **ineligible** for this grant. Please consider applying for a SBSM Fitness Center Grant!

Page 1 – School Contact Information

Please provide thorough answers, incomplete responses may prevent your application from moving forward.

School name:

School district:

School address:

City:

State:

Zip code:

Phone:

Fax:

Website:

Academic year that your school received its fitness center:

Page 2 – Additional School Information

Number of students enrolled:

Percentage of students who receive free or reduced price lunch:

Student body ethnic demographic information:

Number of P.E. teachers:

Average P.E. class size:

Annual P.E. department budget:

Does your school have an after school program that uses the fitness center?

If yes –

After school program information:

Name of program:

Program description:

Website:

Onsite coordinator name (first and last):

Phone number:

Email:

Page 3 – Staff Contact Information

Please provide accurate and thorough contact information. Missing information may prevent your application from moving forward.

Grant Coordinator – this person will serve as the main point of contact for all grant-related communications, a P.E. Department Chair is preferred

First name:

Last name:

Title:

Years at current school:

Work phone:

Mobile phone:

Fax:

Primary email:

Alternate email:

Administrator – Preferably someone who is involved with the P.E. department and will be involved in the SBSM Fitness Center.

First name:

Last name:

Title:

Years at current school:

Work phone:

Mobile phone:

Primary email:

Alternate email:

Principal

First name:

Last name:

Years at current school:

Work phone:

Mobile phone:

Primary email:

Alternate email:

Teacher #1

First name:

Last name:

Years at current school:

Work phone:

Mobile phone:

Primary email:

Alternate email:

Is this person the department chair?

Teacher #2

First name:

Last name:

Years at current school:

Work phone:

Mobile phone:

Primary email:

Alternate email:

Is this person the department chair?

Teacher #3

First name:

Last name:

Years at current school:

Work phone:

Mobile phone:

Primary email:

Alternate email:

Is this person the department chair?

Teacher #4

First name:

Last name:

Years at current school:

Work phone:

Mobile phone:

Primary email:

Alternate email:

Is this person the department chair?

Page 6 - Grant Application Questions

1. Please describe how the SBSM fitness center and curriculum have been incorporated in your P.E. program?
2. How many hours per week is your fitness center in use?
3. Number of students who use the SBSM fitness center during the school day:
4. Outside of P.E., how is the fitness center used? Please include all ways that the center is used (example: athletics, community use, after school program access, etc.)
5. How is technology currently incorporated into P.E. classes on campus?
6. What types of technology is your department looking to incorporate into physical education? Please keep in mind that the maximum technology grant award is \$5,000. Familiarize yourself with the cost of the items in your plan and please submit a plan that does not exceed the maximum award amount.
7. Please put together a plan for how you will implement new technology if supplied through this grant? How will it be used in classes? What results are you hoping to achieve?
8. What challenges would this technology help your department overcome?