

INSTRUCTIONS FOR COMPLETING APPLICATION FOR "THE HUMANITIES IN THE SCHOOLS" (HITS)

COVER SHEET

1. **PROPOSAL TITLE:** Enter the project's name on the lines provided.
2. **GRANT CATEGORY:** Consult the "HITS" brochure for definitions of the grant categories, and circle the most appropriate (**summer institutes, colloquia and symposia**).
3. **GRANT PERIOD REQUESTED:** Enter beginning and ending dates of project. Include follow-up activities in the grant period requested.
4. **SPONSORING ORGANIZATION:** Provide requested information for the sponsoring organization. (Only non-profit organizations are eligible for "HITS" funding.)
5. **COLLABORATING INSTITUTION(S):** Provide the requested information, include additional co-sponsoring institutions in narrative.
6. **PROJECT DIRECTOR:** Provide the requested information for the person designated as project director who has overall responsibility for the grant. This person's resume must accompany the application. The project director must sign the budget summary, item 12.
7. **CO-DIRECTOR (if any):** If there is a co-director, provide the requested information and include resume.
8. **FISCAL AGENT:** Provide the requested information for the administrator of the grant's finances. The fiscal agent must be an individual and not an administrative division and **not** the project director. The fiscal agent must sign the budget summary, item 12.
9. **LEGISLATIVE INFORMATION:** Please indicate in these spaces your institution's: a. Connecticut Tourism District, b. Connecticut Legislative Districts and, c. Connecticut Congressional District. Visit www.vote-smart.org to find your representative information.
10. **PUBLIC RELATIONS CONTACT:** Provide the requested information for the person designated as public relations contact who has overall responsibility for marketing and publicity. This person's resume must accompany the application.

- 11. FUNDS REQUESTED:** list the total amount of grant funds requested (including follow-up) on line A; the total amount of funds available from other sources (private or local cash contributions) and in-kind contributions of facilities, services, etc. on line B; and the total of A and B on C.

BUDGET INFORMATION

- 12. PROJECT BUDGET SUMMARY:** Provide a summary of your project's budget for each category. Please note that project director and fiscal agent signatures are required. Proposals lacking signatures will be turned back. If your institution or organization requires the signature of an authorizing official, it may be added here.
- 13. BUDGET EXPLANATION:** For each budget category, provide detail that explains how you arrived at the total. For example, give the hourly rate and the number of hours for project director's salary; each speaker's honorarium; cost per mile for travel and number of miles; specific supplies needed to carry out the project; number of pieces of mail and mailing rate; specific items to be printed with cost; etc. Please provide these figures for both requested funds and cost-share.

IMPORTANT DEFINITIONS AND BUDGET REGULATIONS:

Salaries: Please explain all salary requests. Staff salaries should be prorated for the period/percentage of time committed to the project. Be specific. Some administrative/secretarial time may be donated as an in-kind contribution.

Consultants: Enter all essential contractual arrangements including consultants and other service subcontracts essential to the proposed activity. The maximum allowable consultant rate for HITS grants is \$350 per day.

Travel: Please itemize all travel requests for all project staff or participants.

Supplies & Materials: Enter the costs of laboratory, instructional and office supplies necessary to conduct the proposed activity. Costs for computer software and wiring must be justified and explained fully.

Equipment Rental: Enter the costs of leasing any equipment essential to the conduct of the proposed activity. Purchases of capital equipment are **not** allowed.

Other Costs: Enter any other costs essential to the conduct of the proposed activity, including all participant costs, stipends, tuition, subsistence, etc. Teacher stipends are limited to **\$60 per day** for non-salaried time. HITS funds cannot be used for

substitutes while teachers are on release time (substitute salaries should be contributed by districts).

Matching Requirement: The one-to-one matching requirement may be met through a combination of external gifts or sources (e.g. business contributions or foundation grants) and/or local sources (e.g. staff time, facilities, substitute payments).

PROJECT NARRATIVE

(Please attach answers to questions 14 to 21. Please use the following headings.)

14. PROPOSAL ABSTRACT: On a separate sheet of paper, briefly describe the project's essential characteristics – type of collaboration, project location, intended audience, humanities disciplines involved; e.g.

Litchfield Historical Society seeks support to host an intensive weeklong summer institute introducing K-12 teachers to a variety of historical topics using primary documents and objects of material culture from the museum's collection. Discussions of national and Connecticut history, geography, and Federalist and Anti-federalist politics reinforcing Social Studies standards as well as integrating Arts and Language Arts standards as outlined in the Connecticut framework. Throughout the institute teachers will work in grade-specific curriculum development teams led by master teachers experienced in writing curriculum to create units of study utilizing the content of the institute.

15. SPONSORING ORGANIZATIONS: Describe briefly the nature of the sponsoring organizations, making nonprofit status clear.

16. DEMONSTRATED LOCAL NEED: Describe the project's alignment with *the goals and activities of the local professional development plans of the participating schools and/or school districts*, and with national and state standards.

17. GOALS AND ANTICIPATED OUTCOMES: List the project's goals and anticipated outcomes, including what teachers *and* students will know and be able to do **differently** in the classroom as a result of the project.

18. PROJECT ACTIVITIES & PARTICIPANTS: Describe all proposed professional development activities including follow-up sessions (including dates and locations). Include total number of contact hours. Explain how project participants will be selected and identify the schools that will provide them. List humanities scholars and planners working in the project, explaining their specific roles and responsibilities and noting the credentials that make them an appropriate choice for these responsibilities.

- 19. ACCESS OF UNDERREPRESENTED/UNDERSERVED GROUPS:** Specify how professional development activities will ensure that educators will be made aware of, and make use of, strategies for serving populations that historically have lacked access to equal opportunities for learning and career advancement.
- 20. COLLABORATIVE PROCESS:** Describe how teachers, media specialists, and school administrators were actively and significantly involved in the planning process.
- 21. EVALUATION PLAN:** Describe the project's evaluation methods and/or indicators of success in relation to its goals and anticipated outcomes. Indicate who will conduct the evaluation and when it will be done (during the activity, immediately following the program or several months later). Provide copies of proposed evaluation instruments to be used in the project.

Please submit a signed original and 14 copies of the complete proposal and accompanying materials to:

Connecticut Humanities Council
955 South Main Street, Suite E
Middletown, CT 06457

For CHC use only.



HUMANITIES IN THE SCHOOLS

Grant Application Form

Deadline: Friday, January 12, 2007

1. Proposal Title: _____

2. Category: Institute Colloquium Symposium

3. Grant Period Requested

From: ____/____/____ To: ____/____/____

4. Sponsoring Organizations

Organization Name: _____
Address: _____
City: _____ State: ____ Zip: _____
Director: _____
Phone: _____ Fax: _____
Web Address: _____
Email: _____

5. Co-Sponsoring Organization (if applicable)

Organization Name: _____
Address: _____
City: _____ State: ____ Zip: _____
Director: _____
Phone: _____ Fax: _____
Web Address: _____
Email: _____

6. Project Director

Name: _____
Institution: _____
Address: _____
City: _____ State: ____ Zip: _____
Phone: _____ Fax: _____
Email: _____

7. Project Co-Director (if applicable)

Name: _____
Institution: _____
Address: _____
City: _____ State: ____ Zip: _____
Phone: _____ Fax: _____
Email: _____

8. Fiscal Agent

Name: _____
Institution: _____
Address: _____
City: _____ State: ____ Zip: _____
Phone: _____
Fax: _____
Email: _____

9a. CT Tourism District: _____

9b. CT Legislative District #: Senate ____ House ____

9c. US Congressional District #: _____

10. Public Relations Contact

Name: _____
Institution: _____
Address: _____
City: _____ State: ____ Zip: _____
Phone: _____
Fax: _____
Email: _____

11. Funding Profile

A. CHC Funds Requested	\$
B. Other External Funders	\$
C. Sponsor Cash	\$
D. Sponsor In-Kind	\$
E. Project Totals	\$

12.

**THE HUMANITIES IN THE SCHOOLS
BUDGET SUMMARY**

BUDGET CATEGORY	REQUESTED HITS FUNDS	REQUIRED 100% MATCH	TOTAL
Personnel Costs – Salaries, Key Personnel (Faculty, Admin.)			
Consultants			
Scholars			
Travel			
Supplies & Materials			
Equipment Rental			
Participant Costs (i.e., stipends, books, other support costs)			
Total Project Costs			

Authorization

Project Director

Project Co-Director

Date

Sponsor

Project Co-Sponsor

Date

Fiscal Agent