Paul T. Spraggins State Initiative Grant
APPLICATION

Purpose: To assist state/chapter associations in creating and/or strengthening outreach initiatives that improve the association’s state advocacy, engagement in education policy, enhance development capacity, train members on and develop media relations, or increase alumni engagement.

Match Funds:
1. States/Chapters become eligible for matching funds each COE budget year, July 1 - June 30, after their Regional Association commits Outreach Initiatives funds for each of its states/chapters.
2. COE matches the Regional Association’s commitment; up to $500 for each state/chapter with an approved grant request submission.
3. States/Chapters are encouraged to budget their own additional funds to leverage the combined COE and Regional commitment.

Submission Requirements: Associations are asked to complete the attached application form and provide a brief project summary. The project summary should be attached and limited to two pages in length. Include a detailed budget showing the amount requested and matched for all activities. The Council will NOT grant funds for travel to the Council’s Policy Seminar, food in excess of $250, or committee planning meetings. The application’s budget should clearly show how funds will be used (being careful to follow non-allowable cost guidelines previously detailed). Please explain in detail how the proposed activity or event will impact the state/chapters’ ability to conduct outreach and advocacy of the TRIO mission. The project summary should also include evaluation method(s) to assess the project.

Deadline: Please send an electronic version of the application form and project summary to your Regional President or his/her designee for signature. Once approved with signature by your Regional President (or his/her designee), applications are then forwarded by the regional president/designee to COE Coordinator of State Initiatives Tallie Sertich (tallie.sertich@coenet.org). It is up to the regional president/designee to send their region’s application(s) as they come in or in a batch by the bi-annual deadline. The COE Coordinator of State Initiatives sends them to the COE Board State Leadership Committee for review and approval. Approved funds will be dispersed to your regional treasurer. Deadlines for applications are May 1st and December 1st of each year. Any applications received after a bi-annual deadline will be considered in the following deadline’s round.

Awardee Requirement: All successful awardees are required to submit a Follow-up Report within 30 days of the awarded project’s completion, including evaluation results and photos (if applicable). A Follow-Up Report template will be provided to awardees.
Paul T. Spraggins State Initiative Grant
GRANT APPLICATION FORM 2018-2019
(www.coenet.org/state_leadership.shtml)

Project Title:______________________________________________________________

Chapter Association:________________________________________________________

Application Submitter Information

Printed Name & Signature________________________________________________________________________

Position in Chapter Association:______________________________________________________________

Email Address:_________________________________________ Phone:________________________________

Funding Information

Chapter Association Funds Committed:________________________

Amount requested from Region (must at least match funds requested from COE): ____________

Amount requested from COE (up to $500)________________________

Regional Approval Required

Regional President (or her/his Designee) Signature:______________________________________________

Regional Treasurer’s Information (Check will be sent to the address provided below)

Name:_________________________________________ Phone:________________________________

Address:_________________________________________________________________________________

Email Address:____________________________________________________________________________

Chapter Treasurer’s Contact Information

Name:_________________________________________ Phone:________________________________

Email Address:____________________________________________________________________________

Applicants must provide a two-page project summary and budget with this form to their Regional Association President or her/his Designee. The regional association President or her/his designee will then submit applications with her/his signature to COE Coordinator of State Initiatives Tallie Sertich (tallie.sertich@coenet.org) for approval by the COE Board State Leadership Committee and disbursement of the 1:1 match with the region. State funds are encouraged to supplement the project.
Paul T. Spraggins Award Application Checklist

_______GRANT APPLICATION FORM

_______Chapter President’s name, email, and phone number

_______Regional President Signature (or his/her designee’s signature)

_______Regional Treasurer’s name, email, phone number, and mailing address

_______Chapter Treasurer’s name, email, and phone number

_______PROJECT SUMMARY

_______What is the project?

_______When will the project be implemented?

_______What is the project's budget – expected income (including funds expected from chapter, region, and COE) and expenditures; follows application’s allowable costs guidelines

_______What evaluation method(s) will you use to assess the project?

If you are a previous awardee since May 2018 has the chapter completed and submitted a Follow-Up Report to tallie.sertich@coenet.org? _____Yes _____No
## Rubric for scoring Paul T. Spraggins Initiative Grants

<table>
<thead>
<tr>
<th></th>
<th>3</th>
<th>2</th>
<th>1</th>
<th>0</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Project Goal</strong></td>
<td>Goal for the project is clearly described; proposal supports Spraggins goals &amp; objectives</td>
<td>Purpose is stated and evidence of need provided. Proposal aligns with Spraggins goals and objectives</td>
<td>Project’s purpose is unclear or does not address state Spraggins goals and objectives</td>
<td>Fails to lay out project goals or project goals are not within application guidelines</td>
<td></td>
</tr>
<tr>
<td><strong>Implementation</strong></td>
<td>Strong and innovative plan with activities that are well defined and linked to project goals</td>
<td>Adequate project design with activities that are defined but project is somewhat unclear. Not clearly linked to project’s goals or lacks innovation.</td>
<td>Design is vague and not clearly linked to the goals or innovative.</td>
<td>Lacks of clear plan of activities, timeline, appropriate for this application</td>
<td></td>
</tr>
<tr>
<td><strong>Plan for Evaluation/Assessment</strong></td>
<td>Proposal includes a variety of methods to assess participants and evaluate the project.</td>
<td>Proposal includes at least two methods to assess participants or evaluate the project.</td>
<td>Proposal includes at least one method to assess participants or evaluate the project.</td>
<td>Proposal does not include any methods to assess participants or evaluate the project</td>
<td></td>
</tr>
<tr>
<td><strong>Uses Exemplary Practices</strong></td>
<td>Project identifies appropriate exemplary practices and clearly relates those practices to the project goals.</td>
<td>Project identifies exemplary practices but has not drawn clear connection to the project goals.</td>
<td>Project does not identify appropriate exemplary practices or has not related these practices to the project goals.</td>
<td>Exemplary practices not identified or related to project goals; no attempt</td>
<td></td>
</tr>
<tr>
<td><strong>Detailed Budget</strong></td>
<td>Budget is complete and contains all required information. Budget is cost effective and linked to activities and outcomes.</td>
<td>Budget is complete but is not cost efficient and/or related to activities and outcomes.</td>
<td>Budget lacks required information or is incomplete.</td>
<td>Proposal does not include a budget.</td>
<td></td>
</tr>
<tr>
<td><strong>Commitment from Regional Association</strong></td>
<td>Supporting documentation from regional association</td>
<td></td>
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</tbody>
</table>

**TOTAL POINTS**

☐ Recommended for funding
☐ Proposal incomplete/Not in alignment with Grant

Reviewer’s comments: