

ENRICHMENT GRANT PROCESS FOR IN-CLASS ACTIVITIES

- STEP 1.** Teacher submits an enrichment grant proposal form for a non-field trip, in-class or in-school event or activity to LSHSA.
- STEP 2.** If LSHSA approves it, proceed to **STEP 3.**
- STEP 3.** Teacher obtains cost of the events/activity.
- STEP 4.** Teacher and Principal work together to get the event/activity on the Agenda for a Ridgewood Board of Education (BOE) Regular Public Meeting. To do so, a required Gift/Donation Request Form (see Step 6) must be provided to the Ridgewood Public Schools Business Office by the Wednesday preceding the scheduled BOE Regular Public Meeting date.
- STEP 5.** For the 2018-2019 school year, the schedule of BOE Regular Public Meetings are set forth **here**.
- STEP 6.** Teacher and Principal work to complete a **Gift/Donation Request Form**, then email or faxed it to:
Jen Ulman, Assistant Board Secretary
Ridgewood Public Schools Business Office
Email: julman@ridgewood.k12.nj.us
Phone: 201-670-2700 x10531
Fax: 201-639-7266
- STEP 7.** No checks are required to accompany the Forms sent to the Business Office.
- STEP 8.** If BOE approves the trip, proceed to **STEP 9.**
- STEP 9.** Teacher plans the activity/event.
- STEP 10.** Teacher will contact the LSHSA Treasurer to secure the appropriate check amount to pay for the event/activity or the vendor can bill the school and LSHSA will reimburse the school after the fact. According to BOE rules, teachers are not permitted to handle cash and checks cannot be made out to the teacher directly.
- STEP 11.** LSHSA is a tax-exempt organization. Please use the Form ST-5 to avoid paying sales tax, if payment is required. This Form can be provided to you upon request.

THANK YOU FOR ENRICHING YOUR STUDENTS' LIVES.



www.LSHSAridgewood.org

LSHSA / Education Center, 49 Cottage Place, Ridgewood NJ 07450

LSHSA IS A PRIVATELY FUNDED 501(c)(3) NON-PROFIT ASSOCIATION

LEARNING SERVICES HOME & SCHOOL ASSOCIATION ENRICHMENT GRANT PROPOSAL FORM

YOUR NAME: _____

SCHOOL: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

CLASSROOM TYPE/THERAPY/POSITION: _____

PLEASE GIVE US A SHORT EXPLANATION OF YOUR TRIP/PROJECT/ACTIVITY:

Please use an additional sheet if necessary

WHEN WILL THIS TRIP/PROJECT/ACTIVITY OCCUR? _____

HOW MANY STUDENTS WILL BENEFIT FROM THE TRIP/PROJECT/ACTIVITY? _____

WHEN DO YOU NEED FUNDS BY? _____

AMOUNT REQUESTED: _____

HAVE YOU REVIEWED YOUR PROPOSAL WITH THE SPECIAL PROGRAMS OFFICE? Y N

HAVE YOU REVIEWED YOUR PROPOSAL WITH YOUR SCHOOL'S PRINCIPAL? Y N

PROPOSAL PROCESS:

Please scan and email completed form to **LSHSA@ridgewood.k12.nj.us**.

*You will receive an email when your application is received, along with a date your proposal will be voted on.
You will receive an email notification within one week of that date regarding the funding decision for your proposal.
Decisions are based on a vote of the LSHSA membership.
Proposals are reviewed on a rolling basis throughout the school year.*

APPLICANT NAME

DATE

QUESTIONS?

Contact Julie Hamon at merieliz@aol.com or 201-447-8902

