



## Grant Pre-Award Process

Date of Request	_____	School or Department	_____
Project Lead	_____	Granting Agency	_____
Application Preparer	_____	Grant Due Date	_____
		Duration of Grant	_____

Order of the information (begin with project sponsor/lead, then grant)

**Approval (initials) Date**

**Notes**

### **Alignment**

_____	_____	<input type="checkbox"/> Alignment to Strategic Plan (indicate KPOs)	_____
_____	_____	<input type="checkbox"/> Alignment to Annual Operation Plan	_____
_____	_____	<input type="checkbox"/> Alignment to School Improvement Plan	_____

### **Legal**

_____	_____	<input type="checkbox"/> Assessment & Research (Director of Assessment & Research – Catherine Matthews)	_____
_____	_____	<input type="checkbox"/> Data Sharing/Contract Review (Procurement Supervisor – Sarah Yeckley)	_____

### **Departments**

_____	_____	<input type="checkbox"/> Program Alignment (appropriate department leader approval)	_____
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### **Budget**

_____	_____	<input type="checkbox"/> Total Cost of Grant - Review District/Dept Indirect Costs (work space, IT start-up)	_____
_____	_____	<input type="checkbox"/> Matching Funds	_____
_____	_____	<input type="checkbox"/> Duration: <input type="checkbox"/> greater than 1 year <input type="checkbox"/> less than 1 year	_____

### **HR/Staffing**

_____	_____	<input type="checkbox"/> Additional Staff Resources Required	_____
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### **Chief Information Officer**

_____	_____	<input type="checkbox"/> Access to Student Data Collection Analysis (And confirm who collects)	_____
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### LITS/Facilities & Operations

_____	_____	<input type="checkbox"/> Software/Hardware Needs	_____
_____	_____	<input type="checkbox"/> Digital Tools	_____
_____	_____	<input type="checkbox"/> Equipment and Facilities Requirements	_____

### Approval

_____	_____	<input type="checkbox"/> Superintendent or Deputy Superintendent (Indemnification)	_____
_____	_____	<input type="checkbox"/> Area Superintendent School Board Approval if \$5,000 or greater)	_____
_____	_____	Principal or Department Approval	_____

Award Date \_\_\_\_\_

### Post Approval Summary Sheet of Key Information

- Report Requirements (Fiscal, Annual) \_\_\_\_\_
- Award Amounts \_\_\_\_\_
- Budget Source (Federal, Local, etc) \_\_\_\_\_
- Grant Application/materials (contract supervisor) \_\_\_\_\_

### Post Award Considerations

- ☐ Establish and communicate timelines to supervisor.
- ☐ Determine reporting deadlines and communicate those to stakeholders.
- ☐ Identify those responsible and departments involved in data collection.
- ☐ Where will information be stored?
  - Contracts \_\_\_\_\_
  - Grant Proposals (both accepted and denied) \_\_\_\_\_
  - Research Documents (stored in research office) \_\_\_\_\_