

AAAEYC Good Idea Grant Application

This is a new grant designed to help child care centers and/or home providers fund a special project or activity for their program. Recipients will receive up to \$750.00 for the project of their choice.

Eligibility

Any licensed child care center or family child care home provider located in Summit, Portage, or Medina County. A home provider, center teacher, or center director may apply on behalf of their program.

Deadline

Grant applications need to be turned in to AAAEYC no later than **February 1, 2010**

Details

Grant applications will be reviewed by a selection committee. Grants will be awarded in March 2010 at our Professional Development Institute. Funds will be distributed in **March, 2010**. Participants will have one year to complete their projects. Once the project is completed, the recipient will need to turn in a follow up report including a summary of their project, documentation of fund usage, and pictures if possible to AAAEYC. We encourage the recipient of the Good Idea Grant to capture the progress of their idea with photos and if possible, present the project at an AAAEYC event.

Application Components (you must include each of these items in your application) total of 60 pts.

- Completed application form (see attached) 10 pts.
- A description of your proposed project. (Approximately 1 page type written, double spaced, 12 pt. font) 20 pts.
- Short description of proposed schedule for the project (how long it will take, when it will be completed) 10 pts.
- Proposed budget with estimated expenses. If project will exceed \$750.00, please explain additional funding sources. 15 pots.
- First time applicants 5 pts.

Send completed applications to:

AAAEYC-Good Idea Grant
P.O. Box 1331
Akron, OH 44309

**Only completed applications tuned in by the deadline will be considered.
Grant recipients will be notified by March 1, 2010.**

AAAEYC Good Idea Grant

Application Form

Date: _____

Applicant Name: _____

Director's Name (centers only): _____

Program Name: _____

Program Address: _____

City: _____ State: _____ Zip Code: _____

Program Telephone: _____ Fax: _____

Email: _____

Please check one:

Child Care Center Family Child Care Home

Name/Title of Project: _____

Number of children in program: _____

How did you hear about the Good Idea Grant?

I agree that if this grant is awarded, the amount will be used to implement the project described in the application.

Director's Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____