



Please complete the form, print it, and forward to Mr. Chad Michalek, Grants & Assessments Coordinator – CEC.  
[cmichalek@msdwt.k12.in.us](mailto:cmichalek@msdwt.k12.in.us)

**MSD of Washington Township  
Donors Choose – Grant Proposal**

Date \_\_\_\_\_ (CEC Staff Only) Date Received \_\_\_\_\_

Role of Applicant in MSDWT:

Teacher Name \_\_\_\_\_

Proposal Submission due Date: \_\_\_\_\_

Building Assignment \_\_\_\_\_ Department \_\_\_\_\_

Life cycle of funding: Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Name of Proposal \_\_\_\_\_

Amount of funding requested \_\_\_\_\_

Brief description of the proposal:

Will this grant be used to purchase technology hardware?  Yes  No

If yes, what device(s) will be purchased? \_\_\_\_\_

Will this grant be used to purchase technology software?  Yes  No

If yes, what software and platform (Mac or PC)? \_\_\_\_\_

Will this grant be used to purchase equipment or facility upgrades?  Yes  No

If yes, please provide a brief description of the purchase:

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**Approval to proceed with proposal:**

Building Principal \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied

Elementary or  
Secondary Director \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied

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If used for purchase of technology:

Director of Technology \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied

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If used for purchase of equipment or facility upgrade:

Director of Operations \_\_\_\_\_ Date: \_\_\_\_\_

Approved  Denied

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Coordinator of Grants and Assessment \_\_\_\_\_

Date: \_\_\_\_\_

Approved  Denied

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Grant approval status will be returned to building principal by the Grants and Assessment Coordinator. Principals will communicate approval status to grantee.

(CEC Staff Only) Date Returned to Building \_\_\_\_\_