## WHAT ARE TIMBERWOLVES FOUNDATION GRANTS?

The Timberwolves Foundation exists to support Mission Vista High School’s academic, athletic, extracurricular and site support needs. The grant program is one way the Foundation provides that support.

## ELIGIBILITY

Any faculty member, department, club or sports team of Mission Vista High School are eligible to apply for a grant. Grant requests submitted by parents/students or community members not listed above may be considered on a case to case basis.

## CRITERIA

Foundation grants are meant to supplement and enhance the educational experience of the students of Mission Vista High school. Grants are determined and awarded per individual circumstances. Some determining factors of a grant’s approval are as follows: 1) the amount of grant requests received and 2) the determined budget in said cycle 2) the grant amount requested is reasonably weighted to the number of students that will be impacted 3) the grant request is in compliance with Vista Unified School District and Mission Vista High School guidelines.

## GRANT CYCLE SCHEDULE

Fall Cycle Due October 8 Decision Late October Paid in Fall

Winter Cycle Due December 3 Decision December Paid in Winter

Spring Cycle Due March 11 Decision March Paid in Spring

**APPLICATION PROCESS**

Complete this application legibly and in its entirety. Attach an estimate, proposal or supporting document outlining the cost of your request. Once the Foundation receives the application, it is evaluated by the Foundation’s Grant Review Committee who will then make a recommendation to the Foundation’s Board of Directors. The Board of Directors will vote on all recommended requests at their next regularly scheduled monthly board meeting. When a grant is awarded, a grant approval letter and general terms and conditions will be forwarded to the grant recipient “requestor’s” contact information provided below. Grants not awarded will be notified via email. Completed grant applications can be submitted to the Timberwolves Foundation mailbox ATTN: Grant Administrator, located in the MVHS office or emailed to [tessa@timberwolvesfoundation.com](mailto:tessa@timberwolvesfoundation.com)

**REQUESTOR'S INFORMATION**

**Requestor's Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*The person we will contact if/when grant is awarded

**I am a (check one):**

Coach \_\_\_ Team Liaison \_\_\_ Teacher \_\_\_ Admin\_\_\_ Staff\_\_\_ Student\_\_\_ Parent\_\_\_ Other\_\_\_/\_\_\_\_\_\_\_\_

your role

**Email**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Department/Booster/Club Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Number of Students this will Benefit:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Amount Requested**: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DESCRIPTION OF REQUEST**

**SIGNATURES AND AUTHORIZATIONS**

Signatures below acknowledge that all information presented here is true and correct to the best of your knowledge and that funds requested will be used solely for the purpose intended. To avoid possible delays in the processing of your application, be sure to complete this application in its entirety, attach all supporting documents and include required signatures where applicable. By signing below you are agreeing to the general grant terms and conditions as listed on the next page. Please keep page 3 for your records.

*\* Parent and Student requests require a second signature from an authorized second signer (listed below)*

*\* Team liaison requests require a second signature from the coach or athletic director*

*\* Site improvement requests require an administrator signature*

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**Requestor Signature** **Date**

**AUTHORIZED SECOND SIGNER**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Head Signature (if Applicable) Date

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Athletic Director Signature (if Applicable) Date

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Coach Signature (if Applicable) Date

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Administrator Signature (if Applicable) Date

**GENERAL GRANT TERMS AND CONDITIONS**

The Timberwolves Foundation (The Foundation) is awarding this grant to you contingent upon the following:

**Expenditure of Funds:**

This grant is made for the purpose outlined in the grant award letter and may not be expended for any other purpose without The Foundation's prior written approval.

If the grant is intended to purchase equipment, support a specific project or provide general support for a specific period, any portion of the grant unexpended after purchase, at the completion of the project or at the end of the period shall be returned immediately to The Foundation.

**Records and Reports:**

You are required to keep a record of all receipts and expenditures relating to this grant.

You also agree to provide any other information reasonably requested by The Foundation. You are required to keep the financial records with respect to this grant for at least one year after all grant funds are fully expended. The Foundation may review any and all records to verify grant compliance.

**Required Notification:**

You are required to provide The Foundation with immediate written notification of: (1) your inability to expend the grant for the purposes described in the grant award letter; or (2) any expenditure from this grant made for any purpose other than those for which the grant was intended.

**Right to Modify or Revoke:**

The Foundation reserves the right to discontinue, modify or withhold any payments to be made under this grant award or to require a total or partial refund of any grant funds if, in The Foundation's sole discretion, such action is necessary: (1) because you have not fully complied with the terms and conditions of this grant; (2) to protect the purpose and objectives of the grant.

**------------KEEP THIS PAGE FOR YOUR RECORDS-----------**