Logo, company name

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**SFUSD / DCYF Student Success Grant Application**

**Implementation Grant Questions***(recommended word count ~300 per each response)*

**APPLICANTS: Please complete all fields on this application. When you are ready to submit, please use the link at the bottom of this form to upload to DCYF.**

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| **APPLICANT CAMPUS:** | [RESPONSE] | | |
| **SUBMITTER NAME:** | [RESPONSE] | **ROLE:** | [RESPONSE] |
| **PHONE:** | [RESPONSE] | **EMAIL:** | [RESPONSE] |

1. **How does your Community Schools Plan align with the district’s goals and guardrails?**

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| [RESPONSE] |

1. **What are your top three current Community Schools goals?**

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| **Goal 1:** | [RESPONSE] |
| **Description:** | [RESPONSE] |
| **Which** [**district goal or guardrail**](https://www.sfusd.edu/about-sfusd/our-mission-and-vision/vision-values-goals-and-guardrails) **does this goal align to?** | [RESPONSE] |
| **Briefly explain how this goal relates to your Hopes and Needs Assessment.** | [RESPONSE] |

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| **Goal 2:** | [RESPONSE] |
| **Description:** | [RESPONSE] |
| **Which** [**district goal or guardrail**](https://www.sfusd.edu/about-sfusd/our-mission-and-vision/vision-values-goals-and-guardrails) **does this goal align to?** | [RESPONSE] |
| **Briefly explain how this goal relates to your Hopes and Needs Assessment.** | [RESPONSE] |

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| **Goal 3:** | [RESPONSE] |
| **Description:** | [RESPONSE] |
| **Which** [**district goal or guardrail**](https://www.sfusd.edu/about-sfusd/our-mission-and-vision/vision-values-goals-and-guardrails) **does this goal align to?** | [RESPONSE] |
| **Briefly explain how this goal relates to your Hopes and Needs Assessment.** | [RESPONSE] |

1. **Describe the school community engagement process for establishing the goals/priorities described above. How were students, families/caregivers, educators and other school staff and community partners engaged?**

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| [RESPONSE] |

1. **What new, deeper, or expanded work do you propose to do to advance these goals through this grant? Why did you choose those programs or interventions?**

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| [RESPONSE] |

1. **Please provide a** [**budget**](https://docs.google.com/spreadsheets/d/1IVuH1C4Rr5uxmVCtdTAf4Mpe1bZyZh5wvQw4ePQtK2w/copy?hl=en) **for the requested funds.  Please include a narrative of how these funds relate to your CCSP funds or other existing community schools budget if applicable.**

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| [RESPONSE] |

1. **What challenges do you anticipate with implementing your community schools plan and the work described above?  How might you mitigate them?**

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| [RESPONSE] |

**Please submit this completed Implementation Grant Application and additional required Student Success Fund grant application items to DCYF** [**via this link**](https://dcyf.jotform.com/240185685705058).