



Application  
Bright Ideas Education Grant Program for Teachers

**Purpose:** The Bright Ideas program is designed to financially support classroom projects for which funding is currently unavailable.

**Eligibility:** Applicant must be a Georgia certified teacher. Teacher may apply for one grant per school year.

**Grant Limit:** Projects are open to all subjects and may be funded up to \$2,000.

**Selection Criteria:** Projects must provide a creative learning experience for students, benefit and directly involve students, contain a clearly defined plan of implementation and encourage teamwork among students.

**Grant Awards:** Grants must be used within current school year. Applicants are required to submit a final report about the grant and winning teachers agree to give Washington EMC the right to use their name, photo and information about the grant in publicity.

**Deadline:** All applications must be completed and received by Washington EMC on or before October 29, 2021. Applications received after the deadline will not be considered.

**Program Coordinator:** Chad Davis, VP Finance & Administration  
Washington Electric Membership Corporation  
258 N Harris St  
Sandersville, Ga 31082  
Phone: 478-552-2577 ext. 817  
Email: c.davis@washingtonemc.com

**Please read carefully before completing!**  
**Applications will not be considered if instructions are not followed completely.**

- Do not include your name, the name of your county or school on pages 2, 3, or 4.
- You must use this form.
- Please adhere to the word limits.
- Do not attach any supplementary materials



**About your project:** (Please do not include your name, the name of your county or school.)

Project Name \_\_\_\_\_

Curriculum Areas \_\_\_\_\_

Grade Level \_\_\_\_\_

Amount Requested \_\_\_\_\_

Minimum needed to fund project \_\_\_\_\_

Number of students to benefit from project \_\_\_\_\_

Will items purchased be used for more than one school year? \_\_\_\_\_

**Project Overview:**

Summary – give an overview of the project (Limit 150 words)



Creativity – Describe the creative elements of the project. (Limit 100 words)

Goals – What are the goals and objectives for students? (Limit 100 words)

Implementation – How will you implement this project? (Limit 100 words)



Benefits – What are the immediate and/or ongoing benefits this project will provide students? (Limit 100 words)

**BUDGET**

Itemized Project Budget (required)

Item Needed	Quantity Needed	Unit Cost	Total Cost	Required? Y/N
<b>Total Project Cost (please estimate total cost to the nearest whole dollar)</b>				<b>\$</b>

Will you accept partial funding? If so, how much \_\_\_\_\_  
 If you receive partial funding, how will you fund the rest of your project? \_\_\_\_\_

\_\_\_\_\_



**Applicant Information**

Teacher Applying for Grant (first and last name) \_\_\_\_\_

Title of Grant Project \_\_\_\_\_

Name of School Where Teacher Works \_\_\_\_\_

Grade(s) Applicant Teaches \_\_\_\_\_

School Mailing Address \_\_\_\_\_

School Street Address \_\_\_\_\_

School City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School Phone Number \_\_\_\_\_

School Fax Number \_\_\_\_\_

Applicant's Email Address \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

School Principal's Signature \_\_\_\_\_

**Applicant Agreement**

I am a Georgia certified teacher. This is the only Bright Ideas application I have submitted for the current school year. I agree, if I am selected, to submit a final report about the grant's outcome. I also agree that my name, photo and information about the grant may be used in publications by Washington EMC without compensation to me or the school.

*All applications must be received by Washington EMC by October 29, 2021. For more information, please call 478-552-2577 ext. 817, or email [c.davis@washingtongemc.com](mailto:c.davis@washingtongemc.com).*

**Mail or email completed application to:** Program Coordinator at information provided on page 1.